#### Case 17-12259 Doc 1 Filed 04/19/17

Document

Entered 04/19/17 1 28 MRUPTO SOUR Land

| UNITED STATES OF NORTHERN DIS | TRICT O | FILLINOIS. |
|-------------------------------|---------|------------|
| APR                           | 9 20    | 17         |

| Fill in this information to identify your case:                        |  | <b>EARR 19 2017</b>                  |
|--|--|--------------------------------------|
| United States Bankruptcy Court for the:  Northern District of Illinois |  | JEFFREY P. ALLSTEADT, CLERK          |
| Case number (If known):  | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

|   | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |
|---|--|--|
| 1. Your full name   |  |  |
| Write the name that is on you<br>government-issued picture  | <sup>ır</sup> David  | Allie  |
| identification (for example,<br>your driver's license or  | First name   | First name   |
| passport).  | Middle name  | Middle name  |
| Bring your picture  | Wang   | Shivers Wang   |
| identification to your meeting with the trustee.  | Last name  | Last name  |
|   | Suffix (Sr., Jr., II, III)   | Suffix (Sr., Jr., II, III)   |
| . All other names you   |  | The second secon |
| have used in the last 8 years   | First name   | First name   |
| Include your married or maiden names.   | Middle name  | Middle name  |
|   | Last name  | Last name  |
|   | First name   | First name   |
|   | Middle name  | Middle name  |
|   | Last name  | Last name  |
| TOTALONS (STORE SA ACOSTICA), AND ACOSTICA AND ACOSTICA AND ACOSTICA | History and the Auditorial Communication of the Com |  |
| Only the last 4 digits of   |  |  |
| your Social Security  | xxx - xx - <u>7 5 7 6</u>  | xxx - xx - <u>2 7 7 0</u>  |
| number or federal   | OR   | OR   |
| Individual Taxpayer   | 9 00 00  |  |
| Identification number   | 9 xx - xx -  | 9 xx - xx  |

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 2 of 60

| Debtor 1 DaVID   | Wang  | Case number (if known)   |
|--|---|--|
| First Name Middle  | Name Last Name  |  |
| नोन्दिर्भक्ता को सामानुष्य करिन्द्र परित्रों प्रतिस्था स्थाप के स्थाप के स्थाप के स्थाप के स्थाप के स्थाप कर क<br>स्थाप के स्थाप के सामानुष्य के स्थाप क | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
| Any business names and Employer Identification Numbers (EIN) you have used in  | ☑ I have not used any business names or EINs.   | ☑ I have not used any business names or EINs.  |
| the last 8 years   | Business name   | Business name  |
| Include trade names and doing business as names  | Business name   | Business name  |
|  | EIN   | EIN  |
|  | EIN   | EIN  |
| 5. Where you live  |   | If Debtor 2 lives at a different address:  |
|  | 4236 N Kenmore Ave, Apt L4  |  |
|  | Number Street   | Number Street  |
|  | Chicago IL 60613  |  |
|  | City State ZIP Code   | City State ZIP Code  |
|  | Cook<br>County  | County   |
|  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.   | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|  | Number Street   | Number Street  |
|  | P.O. Box  | P.O. Box   |
|  | City State ZIP Code   | City State ZIP Code  |
| Why you are choosing   | стемент и положения полож | Check one:   |
| this district to file for bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|  | I have another reason. Explain. (See 28 U.S.C. § 1408.)   | ☐ I have another reason. Explain.<br>(See 28 U.S.C. § 1408.)   |
|  |   |  |
|  |   |  |
|  |   |  |

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 3 of 60

|   | David First Name Middle   | Name                      | Wang<br>Last Name   | ~  | Case number (  | if known)   |
|---|---|---------------------------|---|--|--|---|
|   |   |                           |   |  |  |   |
| Part 2:   | Tell the Court Ab   | out Your                  | Bankruptcy Case   |  |  |   |
| Bankr   | napter of the<br>uptcy Code you   | Check<br>for Bai          | one. (For a brief descr<br>cone. (Form 2010)).  | ription of each, see No<br>Also, go to the top of  | otice Required by 1<br>page 1 and check                    | 11 U.S.C. § 342(b) for Individuals Filing the appropriate box.  |
| are ch<br>under   | oosing to file  | _                         | napter 7  |  |  |   |
|   |   | ☐ Ch                      | apter 11  |  |  |   |
|   |   | 🔲 Ch                      | apter 12  |  |  |   |
| መስዋነቀው መጠበ የራቀስ ቀና ላህ ነውን ነገር ነው።                             | Arthroped/www.eds.s.g.g.g.le/s/Sprgiss.s/97294.bd/2 charlet 12/600-ks/2019098-s-s-  | ☐ Ch                      | apter 13  |  |  |   |
| 3. How y  | ou will pay the fee   | you<br>you<br>sub<br>with | al court for more det<br>urself, you may pay to<br>pmitting your payment<br>h a pre-printed addre | talls about how you with cash, cashier's nt on your behalf, yours.  in installments. If you  | may pay. Typica check, or money our attorney may           | neck with the clerk's office in your lily, if you are paying the fee y order. If your attorney is pay with a credit card or check ption, sign and attach the ents (Official Form 103A). |
|   |   | less<br>pay               | law, a judge may, bu<br>s than 150% of the o  | it is not required to,<br>fficial poverty line th<br>nts). If you choose th  | waive your fee,<br>nat applies to you<br>his option, you m | tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.      |
|   | ou filed for otcy within the  | ☑ No                      |   |  |  |   |
| last 8 y  |   | ☐ Yes.                    | District  | When   | MM / DD / YYYY   | Case number   |
|   |   |                           | District  |  | MM / DD / YYYY   | Case number   |
|   |   |                           |   |  | MM/DD/YYYY   |   |
|   |   |                           | District  | t A Garage   |  |   |
|   |   |                           | District  | When   | MM/ DD/YYYY  | Case number   |
|   | bankruptcy  | ☑ No                      | District  | When   | MM/ DD/YYYY  | Case number   |
| cases po  | ending or being<br>a spouse who is  |                           |   | And the second s |  |   |
| cases per<br>filed by<br>not filing<br>you, or to<br>partner, | ending or being<br>a spouse who is<br>g this case with<br>by a business<br>or by an |                           |   |  |  | Relationship to you  Case number, if known  |
| cases pe<br>filed by<br>not filing<br>you, or l               | ending or being<br>a spouse who is<br>g this case with<br>by a business<br>or by an |                           | Debtor  |  | MM/DD/YYYY   | Relationship to you  Case number, if known  |
| cases pe<br>filed by<br>not filing<br>you, or i<br>partner,   | ending or being<br>a spouse who is<br>g this case with<br>by a business<br>or by an |                           | Debtor District Debtor District   | When When  | MM/DD/YYYY   | Relationship to you  Case number, if known  Relationship to you   |
| cases priled by not filling you, or is partner, affiliate?    | ending or being a spouse who is g this case with by a business or by an             | Yes.                      | Debtor District  Debtor District  Go to line 12.  | When   | MM/DD/YYYY   | Relationship to you  Case number, if known  Relationship to you   |
| cases po<br>filed by<br>not filing<br>you, or i<br>partner,   | ending or being a spouse who is g this case with by a business or by an             | ☐ Yes. ☐ No. ☑ Yes.       | Debtor District  Debtor District  Go to line 12. Has your landlord obta                           | When   | MM/DD/YYYY   | Relationship to you  Case number, if known  Relationship to you  Case number, if known  |

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 4 of 60

| Del | btor 1 David First Name Middle Nam  | Wang                                   |  |   | Case number (if known)_  | \$ to 200 Miles 1944                               | A - Market Peterling  |
|-----|---|--|--|---|--|--|---|
|     |   |  |  |   |  |  |   |
| Pa  | rt 3: Report About Any E  | Businesses You                         | Own as a Sole  | Proprietor                              |  |  |   |
| 12. | Are you a sole proprietor   | ☑ No. Go to Par                        | : 4.   |   |  |  |   |
|     | of any full- or part-time business?   | Yes. Name ar                           | d location of busi   | iness                                   |  |  |   |
|     | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  If you have more than one | Name of b                              | usiness, if any  |   |  |  | <del></del>   |
|     |   | Number                                 | Street   |   |  |  | · · · · · · · · · · · · · · · · · · ·   |
|     | sole proprietorship, use a separate sheet and attach it   |  |  |   |  |  |   |
|     | to this petition.   | City                                   | AFAMATA  |   | State  | ZIP Code   |   |
|     |   | Check th                               | e appropriate box  | x to describe you                       | r business:  |  |   |
|     |   | ☐ Healt                                | h Care Business  | (as defined in 1                        | 1 U.S.C. § 101(27A))   |  |   |
|     |   | ☐ Singl                                | e Asset Real Esta  | ate (as defined in                      | 11 U.S.C. § 101(51B))  |  |   |
|     |   | ☐ Stoci                                | broker (as define  | ed in 11 U.S.C. §                       | 101(53A))  |  |   |
|     |   | Com                                    | modity Broker (as  | s defined in 11 U                       | .S.C. § 101(6))  |  |   |
|     |   | ☐ None                                 | of the above   |   |  |  |   |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and<br>are you a small business  | can set appropria<br>most recent balar | te deadlines. If yo<br>ce sheet, statem  | ou indicate that y<br>ent of operations | now whether you are a sr<br>ou are a small business on<br>cash-flow statement, ar<br>cedure in 11 U.S.C. § 11  | debtor, you must attact<br>nd federal income tax r | h your  |
|     | debtor? For a definition of small   | 🗹 No. I am not                         | filing under Chap  | ter 11.                                 |  |  |   |
|     | business debtor, see<br>11 U.S.C. § 101(51D).   | No. I am filing the Bank               | g under Chapter 1<br>ruptcy Code.  | 11, but I am NO1                        | a small business debtor  | according to the defini                            | ition in  |
|     |   |  | s. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |   |  |  |   |
| Pa  | rt 4: Report if You Own   | or Have Any Haz                        | ardous Prope   | rty or Any Pro                          | perty That Needs In  | nmediate Attentio                                  | n   |
| 14. | Do you own or have any  | ☑ No                                   |  |   |  |  |   |
|     | property that poses or is<br>alleged to pose a threat<br>of imminent and<br>identifiable hazard to<br>public health or safety?  | ☐ Yes. What is                         | the hazard?  |   |  |  |   |
|     | Or do you own any property that needs immediate attention?  | If imme                                | diate attention is   | needed, why is i                        | t needed?  | BATANAS FARMANIA (CONT.)                           | Albania wa Marana and American |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |  | -  |   | enterona en  |  |   |
|     |   | Where i                                | s the property?  | Number S                                | ireet  |  |   |
|     |   |  |  | water we                                | wakanina hii Milila (Milila (M | ***************************************            | ***************************************   |
|     |   |  | 7  | City                                    |  | State ZIP Cod                                      | de  |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 5 of 60

| Debtor 1 | David      |             | Wang      | Case number (if known) |
|----------|------------|-------------|-----------|------------------------|
|          | First Name | Middle Name | Last Name |                        |

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| l am | not   | require  | d to | receive  | a   | briefing | about |
|------|-------|----------|------|----------|-----|----------|-------|
| cred | it co | ounselii | na b | ecause ( | of: | :        |       |

Disability.

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

incapable of realizing or making rational decisions about finances.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before i filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of:                 |

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 6 of 60

| Debtor 1                                   | David First Name Middle Nam  | Wang<br>Last Name   | Case number (#)   | (nown)   |  |  |  |
|--|--|---|---|--|--|--|--|
|  |  |   |   |  |  |  |  |
| - 40                                       | l  |   |   |  |  |  |  |
| Part 6:                                    | Answer These Que   | stions for Reporting Purpos   | ses   |  |  |  |  |
|  | t kind of debts do   | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." |   |  |  |  |  |
| ,  |  | <ul><li>☑ No. Go to line 16b.</li><li>☑ Yes. Go to line 17.</li></ul>   |   |  |  |  |  |
|  |  | money for a business or ir  | rily business debts? Business debt.  Nestment or through the operation of th                              |  |  |  |  |
|  |  | <ul><li>No. Go to line 16c.</li><li>Yes. Go to line 17.</li></ul>   |   |  |  |  |  |
|  |  | 16c. State the type of debts you  | u owe that are not consumer debts or bu   | usiness debts.   |  |  |  |
|  | ou filing under<br>ster 7?   | ☐ No. I am not filing under Cl  | hapter 7. Go to line 18.  |  |  |  |  |
| any e<br>exclu<br>admin<br>are p<br>availa | ou estimate that after exempt property is ided and nistrative expenses aid that funds will be able for distribution secured creditors? | Yes. I am filing under Chapt<br>administrative expense<br>No  Yes   | ter 7. Do you estimate that after any exe<br>es are paid that funds will be available to                  | empt property is excluded and o distribute to unsecured creditors?   |  |  |  |
|  | many creditors do estimate that you  | ☑ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999   | 1,000-5,000<br>5,001-10,000<br>10,001-25,000  | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000   |  |  |  |
|  | much do you<br>ate your assets to<br>orth?   | <b>2</b> \$0-\$50,000<br>□ \$50,001-\$100,000<br>□ \$100,001-\$500,000<br>□ \$500,001-\$1 million   | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion  More than \$50 billion |  |  |  |
|  | much do you<br>ate your liabilities<br>?   | \$0-\$50,000<br>\$\subseteq\$ \$50,001-\$100,000<br>\$\subseteq\$ \$100,001-\$500,000<br>\$\subseteq\$ \$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion  More than \$50 billion |  |  |  |
| Part 7:                                    | Sign Below   |   | •••••   |  |  |  |  |
| For you                                    |  | I have examined this petition, a correct.   | nd I declare under penalty of perjury tha   | at the information provided is true and  |  |  |  |
|  |  |   | apter 7, I am aware that I may proceed<br>I understand the relief available under e                       | , if eligible, under Chapter 7, 11,12, or 13 ach chapter, and I choose to proceed                            |  |  |  |
|  |  |   | d I did not pay or agree to pay someone and read the notice required by 11 U.S.                           | e who is not an attorney to help me fill out<br>C. § 342(b).   |  |  |  |
|  |  | I request relief in accordance wi   | th the chapter of title 11, United States   | Code, specified in this petition.  |  |  |  |
|  |  | I understand making a false star<br>with a bankruptcy case can resu<br>18 U.S.C. §§ 152, 1341, 1519, a  | ult in fines up to \$250,000, or imprisonm  | g money or property by fraud in connection<br>ent for up to 20 years, or both.                               |  |  |  |
|  |  | Signature of Debutor 1  | Cary X Signatu  | e of Debtor 2  |  |  |  |
|  |  | Executed on 4/3 a   |   | ed on 4-13-2017  |  |  |  |

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 7 of 60

| Debtor 1             | David First Name Middle Name                    | Wang<br>Last Name  | Case number (if known)   |
|----------------------|---|--|--|
| bankrupt<br>attorney | f you are filing this<br>cy without an          | should understand themselves successf  | an individual, to represent yourself in bankruptcy court, but you at many people find it extremely difficult to represent ully. Because bankruptcy has long-term financial and legal re strongly urged to hire a qualified attorney.   |
| an attorn            | e represented by ey, you do not like this page. | technical, and a mistake<br>dismissed because you<br>hearing, or cooperate wi<br>firm if your case is select   | ust correctly file and handle your bankruptcy case. The rules are very or inaction may affect your rights. For example, your case may be did not file a required document, pay a fee on time, attend a meeting or the the court, case trustee, U.S. trustee, bankruptcy administrator, or audit red for audit. If that happens, you could lose your right to file another otections, including the benefit of the automatic stay.  |
|                      |   | court. Even if you plan to<br>in your schedules. If you<br>property or properly clain<br>also deny you a discharg<br>case, such as destroying<br>cases are randomly audi | perty and debts in the schedules that you are required to file with the pay a particular debt outside of your bankruptcy, you must list that debt do not list a debt, the debt may not be discharged. If you do not list in it as exempt, you may not be able to keep the property. The judge can be of all your debts if you do something dishonest in your bankruptcy or hiding property, falsifying records, or lying. Individual bankruptcy ted to determine if debtors have been accurate, truthful, and complete. erious crime; you could be fined and imprisoned. |
|                      |   | hired an attorney. The co<br>successful, you must be<br>Bankruptcy Procedure, a  | ut an attorney, the court expects you to follow the rules as if you had urt will not treat you differently because you are filing for yourself. To be familiar with the United States Bankruptcy Code, the Federal Rules of not the local rules of the court in which your case is filed. You must also exemption laws that apply.   |
|                      |   | Are you aware that filing consequences?  No Yes  | for bankruptcy is a serious action with long-term financial and legal  |
|                      |   | Are you aware that bankr   | uptcy fraud is a serious crime and that if your bankruptcy forms are you could be fined or imprisoned?   |
|                      |   | Did you pay or agree to p  No Yes. Name of Person_   | ay someone who is not an attorney to help you fill out your bankruptcy forms?  Petition Preparer's Notice, Declaration, and Signature (Official Form 119).   |
|                      |   | have read and understood   | ledge that I understand the risks involved in filing without an attorney. I define the third this notice, and I am aware that filing a bankruptcy case without an lose my rights or property if I do not properly handle the case.   |
|                      | ,   | Signature of Debtory   | Signature of Debtor 2  |
|                      |   | Date $\frac{4/2}{MM/DD/YY}$ Contact phone $262-5$  | $\frac{20/7}{YY}$ Date $\frac{4\cdot/3\cdot207}{MM/DD/YYYY}$ $\frac{15\cdot15\cdot13}{YY}$ Contact phone $\frac{324\cdot350}{327\cdot350}$   |
|                      |   | Cell phone   | Cell phone   |
|                      |   | Email address  | Email address  |

## Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 8 of 60

| Fill in this in     | nformation to ic   | lentify your case:         |             | N. P. N. |
|---------------------|--------------------|----------------------------|-------------|----------|
| Debtor 1            | David              |                            | Wang        |          |
|                     | First Name         | Middle Name                | Last Name   |          |
| Debtor 2            | Allie              | !                          | Shiver Wang |          |
| (Spouse, if filing) | First Name         | Middle Name                | Last Name   |          |
| United States       | Bankruptcy Court I | for the: Northern District | of Illinois |          |
| Case number         |                    |                            |             |          |
|                     | (If known)         |                            |             |          |

☐ Check if this is an amended filing

12/15

### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| your original forms, you must fill out a new Summary and check the box at the top of this page.  |                                      |
|--|--------------------------------------|
| Part 1: Summarize Your Assets  |                                      |
|  | Your assets<br>Value of what you own |
| Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$0.00                               |
| 1ь. Copy line 62, Total personal property, from Schedule A/B   | \$                                   |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$2,067.00                           |
| Part 2: Summarize Your Liabilities   |                                      |
|  | Your liabilities Amount you owe      |
| <ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol> | \$63,782.00                          |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$                                   |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | + \$ 34,110.00                       |
| Your total liabilities   | \$ 97,892.00                         |
| Part 3: Summarize Your Income and Expenses   |                                      |
| 4. Schedule I: Your Income (Official Form 106!)  Copy your combined monthly income from line 12 of Schedule I  | \$4,041.00                           |
| Schedule J: Your Expenses (Official Form 106J)     Copy your monthly expenses from line 22c of Schedule J  | \$4,023.00                           |
|  |                                      |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 9 of 60

| De             | btor 1             | David<br>First Name                                  | Middie Name   | Wang Last Name  | c  | Case number (if kr  | own)  |  |   |
|----------------|--------------------|--|---|---|--|---|---|--|---|
|                |                    | THOU TEETING   | HARDIE HAINE  | cast Name   |  |   |   |  |   |
| Pa             | art 4:             | Answer T   | hese Question   | s for Administrative and Statis   | stical Record  | s   |   |  |   |
| 6.             | Are yo             | ou filing for t                                      | oankruptcy under  | Chapters 7, 11, or 13?  |  |   |   |  |   |
|                |                    | . You have n   |   | this part of the form. Check this box   | and submit this  | form to the cou   | urt with your othe  | r schedules.                             |   |
| 7.             | What k             | kind of debt   | do you have?  | (Berthelphile II) жөлөө, өвүндөүү барашан күлдүүнүн байдан байдан байдан байдан байдан байдан байдан байдан бай | udakan Masagan da udah sebengah da basah sebagai da sabah sebagai seba | Printer geralegan til sämliget helpedaser dan sammangsmen | er, een een gebruik van de beken de kompensjon in de perspectievelege kan besteel een |  | Profesion Common  |
|                | ☑ Yo<br>fan        | ur debts are<br>nily, or house                       | primarily consun<br>hold purpose." 11                                       | ner debts. Consumer debts are those U.S.C. § 101(8). Fill out lines 8-9g for                                    | e "incurred by ar<br>statistical purpo   | n individual pri<br>oses. 28 U.S.C                        | marily for a perso  | nal,                                     |   |
|                | You this           | ur debts are<br>form to the o                        | not primarily con<br>court with your othe                                   | sumer debts. You have nothing to rear schedules.  | eport on this pai  | t of the form. (  | Check this box an   | d submit                                 |   |
| 8.             | From t<br>Form 1   | he <i>Statemer</i><br>22A-1 Line 1                   | nt of Your Current<br>1; OR, Form 122B                                      | Monthly Income: Copy your total cu<br>Line 11; OR, Form 122C-1 Line 14.   | rrent monthly ir   | ncome from Of   | ficial  | \$1,739.                                 | Probabilish fishiowasanessimoline, res  |
| No arcillos (A | san amenda da sa a | ng kalanda di kananda kananda da ngangangangan sa sa | o tilligili och to som kommen som som fra harbitade krimte kann systemater. | ieo / da dijima waka kumumunguniko ng sa angan ngangan mahangay na angada, sa pangangangangangangan ng sa sa s  |  |   |   |  |   |
|                |                    |  |   |   |  |   |   | 7, | A many desired of the SE A SP SE  |
| 9. (           | Copy th            | ne following   | special categorie   | s of claims from Part 4, line 6 of So   | chedule E/F:   |   |   |  |   |
|                |                    |  |   |   |  | Total cla   | im  |  |   |
|                | From               | Part 4 on So   | hedule E/F, copy  | the following:  |  |   |   |  |   |
| ę              | a. Dom             | nestic support                                       | t obligations (Copy   | line 6a.)   |  | \$  | 0.00  |  |   |
| ç              | b. Taxe            | es and certair                                       | n other debts you c   | we the government. (Copy line 6b.)  |  | \$  | 0.00  |  |   |
| ę              | c. Clair           | ms for death o                                       | or personal injury v  | while you were intoxicated. (Copy line  | 6c.)   | \$  | 0.00  |  |   |
| 9              | d. Stud            | ent loans. (C  | opy line 6f.)   |   |  | \$  | 0.00  |  | 100 T |
| 9              | e. Oblig<br>priori | gations arising<br>ity claims. (C                    | g out of a separation opy line 6g.)   | on agreement or divorce that you did  | not report as  | \$  | 0.00  |  | 24 100 100 100 100 100 100 100 100 100 10   |
| 9              | f. Debt            | s to pension   | or profit-sharing pla   | ans, and other similar debts. (Copy lir   | ne 6h.)  | + \$  | 0.00  |  | 100   |
| 9:             | g. <b>Tota</b> i   | i. Add lines 9                                       | a through 9f.   |   |  | \$  | 0.00  |  | Viene e sesse pent type denne   |
|                |                    |  |   |   |  |   | <u></u>   |  |   |

| Case 17-12259 Doc 1 F  |  | ered 04/19/17 11:28:19<br>10 of 60   | Desc Main   |
|--|--|--|---|
| Fill in this information to identify your case and this  Debtor 1 David  First Name Middle Name  Debtor 2 Allie SI (Spouse, if filing)  First Name Middle Name  United States Bankruptcy Court for the: Northern District of Case number   | Wang Last Name Last Name Univers Wang Last Name  |  | ☐ Check if this is an amended filing                      |
| Official Form 106A/B  Schedule A/B: Propert  In each category, separately list and describe items category where you think it fits best. Be as complete responsible for supplying correct information. If m write your name and case number (if known). Answers Part 1: Describe Each Residence, Building, | s. List an asset only once. If<br>the and accurate as possible<br>ore space is needed, attach a<br>ver every question. | If two married people are filing tog a separate sheet to this form. On the | ether, both are equally<br>e top of any additional pages, |
| Do you own or have any legal or equitable interest   |  |  |   |

If you own or have more than one, list here:

Street address, if available, or other description

State

ZIP Code

County

| Duplex or multi-unit building |
|-------------------------------|
| Condominium or cooperative    |
| Manufactured or mobile home   |
| Land                          |

\$\_\_\_\_\_ Describe th Current value of the portion you own?

Describe the nature of your ownership interest (such as fee simple, tenancy by

the entireties, or a life estate), if known.

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property.

☐ Check if this is community property

(see instructions)

Current value of the

entire property?

Who has an interest in the property? Check one.

| Debtor 1 only       |
|---------------------|
| Debtor 2 only       |
| Debtor 1 and Debtor |

Debtor 1 only
Debtor 2 only

Single-family home

Investment property

☐ Timeshare

Other.

Debtor 1 and Debtor 2 only

At least one of the debtors and another

What is the property? Check all that apply.

property identification number:

Debtor 1 and Debtor 2 onlyAt least one of the debtors and another

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

Other information you wish to add about this item, such as local

City

County

Document Page 11 of 60 David Wang Debtor 1 Case number (if known) What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Land Investment property Describe the nature of your ownership ZIP Code City State ☐ Timeshare interest (such as fee simple, tenancy by ☐ Other\_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 0.00 you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ☑ Yes Nissan Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put 3.1. the amount of any secured claims on Schedule D: Altima Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2013 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: 13.010.00 0.00 Check if this is community property (see instructions) If you own or have more than one, describe here: Dodge Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: 3.2 the amount of any secured claims on Schedule D: Advenger Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2014 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 0.00 9,100.00 ☐ Check if this is community property (see instructions)

Case 17-12259

Doc 1

Filed 04/19/17

Entered 04/19/17 11:28:19

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Document Page 12 of 60 David Wang Debtor 1 Case number (if known) Chevy Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Malibu Debtor 1 only Model: Creditors Who Have Claims Secured by Property, Debtor 2 only 2016 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 24,000.00 0.00 ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **Z** No Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year:

Other information:

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this is community property (see instructions)

Current value of the entire property?

Current value of the portion you own?

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

|   | ŀ |      |
|---|---|------|
|   | ¢ | 0.00 |
| • | Ψ |      |

Document

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Page 13 of 60

Debtor 1

David

First Name

Wang

Last Name

Case number (if known)\_

| D   | o you own or have anv                                  | legal or equitable interest in any of the following items?   | Current value of the   |
|-----|--|--|--|
|     |  | 지하는 것이 되는 것이 많은 사람들이 되는 것이 없었다. 이 등에 가장이 하는 것이 되는 것이 되었다. 그렇게 되었다는 것은 사람이 되었다.   | portion you own?  Do not deduct secured claims or exemptions.  |
| 6.  | Household goods and                                    | d furnishings  |  |
|     | Examples: Major applia                                 | ances, furniture, linens, china, kitchenware   |  |
|     | ☐ No   |  |  |
|     | Yes. Describe  | Furniture  | \$1,500.00   |
| 7.  | Electronics  |  | I  |
|     | collections;   | and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games  |  |
|     | ☑ No   |  | Annual to the second to the se |
|     | Yes. Describe  |  | \$   |
| 8.  | Collectibles of value                                  |  | navna a mira už  |
|     |  | d figurines; paintings, prints, or other artwork; books, pictures, or other art objects;<br>or baseball card collections; other collections, memorabilia, collectibles |  |
|     | Yes. Describe  |  | \$   |
| 9.  | Equipment for sports                                   | and hobbies  | november of  |
|     |  | ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments                                    |  |
|     | <b>☑</b> No  |  | MONAN Management   |
|     | Yes. Describe  |  | \$   |
| 10. | Firearms   | L  |  |
|     | Examples: Pistols, rifles  No                          | , shotguns, ammunition, and related equipment  | ·  |
|     | Yes, Describe  |  | \$   |
| 11. | Clothes  |  | arrive memorial  |
|     | Examples: Everyday clo                                 | thes, furs, leather coats, designer wear, shoes, accessories   |  |
|     | Yes. Describe  |  | \$ 500.00  |
| 12  | Jewelry  |  |  |
|     | -  | velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,  |  |
|     | ☑ No   |  |  |
|     | Yes. Describe  |  | \$   |
|     | <b>Non-farm animals</b> <i>Examples:</i> Dogs, cats, b | irds horses  |  |
|     | No No  | 1143, 1101363  |  |
|     | Yes. Describe  |  | \$   |
| 4.  | Aπy other personal and                                 | household items you did not already list, including any health aids you did not list   | ma parade  |
|     | ☑ No   |  |  |
|     | Yes. Give specific                                     |  | \$   |
|     | information  |  |  |
|     |  | all of your entries from Part 3, including any entries for pages you have attached   | \$2,000.00   |
| - 1 | /or Paπ 3. Write that nu                               | mber here  |  |

Case 17-12259 Doc 1

Filed 04/19/17 Document Wang

Entered 04/19/17 11:28:19 Desc Main Page 14 of 60

Debtor 1

David

First Name

Middle Name

Case number (if known)\_

| Do you own or have an   | y legal or equitable interest in   | any of the following?  | Current value of the portion you own? Do not deduct secured claim or exemptions. |
|---|--|--|--|
| 16. <b>Cash</b>   |  |  |  |
| Examples: Money you   | u have in your wallet, in your ho  | me, in a safe deposit box, and on hand when you file yo  | our petition   |
| ☑ No  |  |  |  |
| <b>U</b> Yes  |  | Cast   | h:\$   |
| 17. Deposits of money Examples: Checking, and other:                    | savings, or other financial accor<br>similar institutions. If you have n   | unts; certificates of deposit; shares in credit unions, bro<br>nultiple accounts with the same institution, list each. | kerage houses,   |
| ☐ No  |  |  |  |
| <b>2</b> Yes  |  | Institution name:  |  |
|   | 17.1. Checking account:  | Citibank   | \$\$   |
|   | 17.2. Checking account:  |  |  |
|   | 17.3. Savings account:   |  |  |
|   | 17.4. Savings account:   |  |  |
|   | 17.5. Certificates of deposit:   |  |  |
|   | 17.6. Other financial account:   |  | \$   |
|   | 17.7. Other financial account:   |  |  |
|   | 17.8. Other financial account:   |  |  |
|   | 17.9. Other financial account:   |  |  |
|   |  |  |  |
| 19 Ronde mutual funde   | or publicly traded stocks  |  |  |
| · · · · · · · · · · · · · · · · · · ·                                   | •  | rage firms, money market accounts  |  |
| ☑ No  |  |  |  |
| ☐ Yes   | Institution or issuer name:  |  |  |
|   |  |  | \$   |
|   | ***************************************  |  |  |
|   |  |  | T  |
| and Aller and Make to the dead of                                       | 4  |  |  |
| <ol> <li>Non-publicly traded standard an LLC, partnership, a</li> </ol> | · · · · · · · · · · · · · · · · · · ·  | ated and unincorporated businesses, including an i   | nterest in   |
| No No   | Name of entity:  |  | wnership:  |
| Yes. Give specific information about                                    | Association for the control of the C | 0%   | % \$   |
| them  |  | 0%   | % \$   |
|   |  | U 70   | % \$   |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Document Page 15 of 60 David Wang Debtor 1 Case number (if known) First Name Middle Name Last Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **Ø** No ☐ Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☑ No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: \_\_\_ Prepaid rent: Telephone: Water: Rented furniture: Other:

nuities (A contract for a periodic payment of money to you, either for life or for a number of years)

| Annulues (A contract for | a periodic payment of money to you, either to the of for a number of yearsy |    |
|--------------------------|---|----|
| ☑ No                     |   |    |
| Yes                      | Issuer name and description:  |    |
|                          |   | \$ |
|                          |   | \$ |
|                          |   | \$ |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Document Page 16 of 60 David Wang Debtor 1 Case number (if knowl Middle Name 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Z No ☐ Yes ..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **☑** No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ZI No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☑ No Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. ..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement **21** No Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement:

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

2 No

Property settlement:

Document Page 17 of 60 David Wang Debtor 1 Case number (if known) 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance **Z** No ☐ Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Z No Yes. Describe each claim. 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim...... 35. Any financial assets you did not already list Z No ☐ Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached 67.00 for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned 2 No Yes, Describe... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices 2 No

Yes. Describe...

Document Page 18 of 60 David Wang Debtor 1 Case number (if known) First Name Middle Name Last Na 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes. Describe.... 41. Inventory M No Yes. Describe. 42. Interests in partnerships or joint ventures ☑ No Yes. Describe..... Name of entity: % of ownership: % 43. Customer lists, mailing lists, or other compilations **☑** No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe...... 44. Any business-related property you did not already list M No Yes. Give specific information ...... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☑ No ☐ Yes.....

Page 19 of 60 Document David Wang Debtor 1 Case number (if known) First Nam Middle Name 48. Crops-either growing or harvested **Ø** No ☐ Yes. Give specific information...... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Z No ☐ Yes. 50. Farm and fishing supplies, chemicals, and feed ZI No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list Z No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ZI No ☐ Yes. Give specific information..... 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... Part 8: List the Totals of Each Part of this Form 0.00 55. Part 1: Total real estate, line 2 0.00 56. Part 2: Total vehicles, line 5 2,000.00 57. Part 3: Total personal and household items, line 15 67.00 58. Part 4: Total financial assets, line 36 0.00 59 Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 2,067.00 2,067.00 Copy personal property total > 62. Total personal property. Add lines 56 through 61. .....

2,067.00

page 10

63. Total of all property on Schedule A/B. Add line 55 + line 62.

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 20 of 60

| Debtor 1                             | David               | Wang                            |            |
|--------------------------------------|---------------------|---------------------------------|------------|
|                                      | First Name          | Middle Name                     | Last Name  |
| Debtor 2                             | Allie               | Sh                              | ivers Wang |
| (Spouse, if filing                   | First Name          | Middle Name                     | Last Name  |
| United States Case number (If known) | Bankruptcy Court fo | or the: Northern District of If | linois     |

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| _  |   | the applicable statutory amo  |  | property to determine to exceed the   | anioun, your oxemption             |
|----|---|---|--|---|------------------------------------|
|    | Which set of e                                      | xemptions are you claiming?<br>iming state and federal nonban<br>iming federal exemptions. 11 t | Check one only, even if  | •   |                                    |
| 2. | Brief descripti                                     | ty you list on Schedule A/B t<br>on of the property and line on<br>that lists this property     | Current value of the portion you own  Copy the value from Schedule A/B | pt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption. | Specific laws that allow exemption |
|    | Brief<br>description:<br>Line from<br>Schedule A/B: | Automobile 3.1  | \$ <u>0.00</u>   | \$\frac{13,010.00}{100\% of fair market value, up to any applicable statutory limit                           | 735 ILCS 5/12-1001(c)              |
|    | Brief<br>description:<br>Line from<br>Schedule A/B: | Automobile 3.2  | \$_0.00  |   | 735 ILCS 5/12-1001(c)              |
|    | Brief<br>description:<br>Line from<br>Schedule A/B: | Automobile 3.3  | \$_0.00  | \$\frac{24,000.00}{100\% of fair market value, up to any applicable statutory limit                           | 735 ILCS 5/12-1001(c)              |
| 3. | (Subject to adjust No                               | •   | years after that for cases   | s filed on or after the date of adjustment.   | <b>,</b>                           |

Document

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Page 21 of 60

Debtor 1

David First Name

Middle Name

Wang

Last Name

Case number (if known)\_

#### **Additional Page**

| Brief descript<br>on Schedule | tion of the property and line<br>A/B that lists this property  | e i de la companya d | t value of the<br>you own                         | Amount of the exemption you claim                                    | Specific laws that allow exemption    |
|-------------------------------|--|--|---|--|---------------------------------------|
|                               |  | Copy the Schedu  | ne value from<br>ile A/B                          | Check only one box for each exemption                                | on.                                   |
| Brief<br>description:         | Furniture  | \$   | 1,500.00  | <b>☑</b> \$1,500.00  | 735 ILCS 5/12-1001(b)                 |
| Line from<br>Schedule A/B:    | 6  |  |   | ☐ 100% of fair market value, up to any applicable statutory limit    |                                       |
| Brief<br>description:         | Clothes  | \$   | 500.00  | <b>∡</b> \$500.00  | 735 ILCS 5/12-1001(a)                 |
| Line from<br>Schedule A/B:    | 11   |  |   | ☐ 100% of fair market value, up to<br>any applicable statutory limit |                                       |
| Brief<br>description:         | Checking Account   | \$   | 67.00   | <b>₫</b> \$67.00   | 735 ILCS 5/12-1001(b)                 |
| Line from<br>Schedule A/B:    | <u>17.1</u>  |  |   | ☐ 100% of fair market value, up to any applicable statutory limit    |                                       |
| Brief<br>description:         |  | \$   | ·   | <u> </u>   | ·<br>·                                |
| Line from<br>Schedule A/B:    |  |  |   | ☐ 100% of fair market value, up to any applicable statutory limit    |                                       |
| Brief<br>description:         |  | \$   |   | <b></b>  |                                       |
| Line from<br>Schedule A/B:    |  |  |   | ☐ 100% of fair market value, up to any applicable statutory limit    |                                       |
| Brief<br>description:         |  | \$   |   | <u> </u>   | :                                     |
| Line from<br>Schedule A/B:    | Rinears Little to a chapterine   |  |   | ☐ 100% of fair market value, up to any applicable statutory limit    | *                                     |
| Brief<br>description:         |  | \$   | <del>, , , , , , , , , , , , , , , , , , , </del> | <b></b>  |                                       |
| Line from<br>Schedule A/B:    |  |  |   | 100% of fair market value, up to any applicable statutory limit      |                                       |
| Brief description:            | <del></del>  | \$   | <del></del>                                       | <u></u> \$   | :                                     |
| Line from<br>Schedule A/B:    |  |  |   | 100% of fair market value, up to any applicable statutory limit      | · · · · · · · · · · · · · · · · · · · |
| Brief<br>description:         |  | \$   |   | <b></b> \$   | · · · · · · · · · · · · · · · · · · · |
| Line from<br>Schedule A/B:    |  |  |   | 100% of fair market value, up to any applicable statutory limit      | ·                                     |
| Brief description:            | white the second | \$   | <del></del>                                       | <u> </u>   |                                       |
| Line from<br>Schedule A/B:    |  |  |   | 100% of fair market value, up to any applicable statutory limit      | :                                     |
| Brief<br>description:         | MINIMARKAN   | \$   |   | □ \$   |                                       |
| Line from<br>Schedule A/B:    |  |  |   | ☐ 100% of fair market value, up to any applicable statutory limit    |                                       |
| Brief description:            |  | \$   |   | <u> </u>   | •                                     |
| Line from Schedule A/B:       | ww   |  |   | ☐ 100% of fair market value, up to<br>any applicable statutory limit |                                       |

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 22 of 60

| Fill in this information to identify your case   | 50  |   |                             |                      |
|--|---|---|-----------------------------|----------------------|
|  |   |   |                             |                      |
| Debtor 1 David First Name Middle I   | Wang Name Last Name   |   |                             |                      |
| Debtor 2 Allie   | Shivers Wang  |   |                             |                      |
| (Spouse, if filing) First Name Middle I  |   |   |                             |                      |
| United States Bankruptcy Court for the: Northern   | District of litinois  |   |                             |                      |
| Case number (if known)   |   |   | ☐ Chec                      | ck if this is an     |
| and the second s |   |   | amer                        | nded filing          |
| Official Form 106D   | · ·   |   |                             |                      |
|  | - Whattana Olaima Caara   |   |                             |                      |
| Schedule D: Creditor   | s Who Have Claims Secur   | ea by Proj  | perty                       | 12/15                |
| Be as complete and accurate as possible.   | If two married people are filing together, both are ed<br>y the Additional Page, fill it out, number the entries, | qually responsible f  | or supplying corr           | ect<br>of any        |
| additional pages, write your name and cas  |   | and attack it to this   | romi. On the top            | or uny               |
| Do any creditors have claims secured b   | w your property?  |   |                             |                      |
|  | m to the court with your other schedules. You have nothi  | ing else to report on t   | this form.                  |                      |
| ✓ Yes. Fill in all of the information below.   | · · · · · · · · · · · · · · · · · · ·   |   |                             |                      |
|  |   | •   |                             |                      |
| Part 1: List All Secured Claims  |   |   |                             | 0.10                 |
| 2. List all secured claims. If a creditor has m  | nore than one secured claim, list the creditor separately   | Column A  Amount of claim   | Column B Value of collatera | Column C I Unsecured |
|  | as a particular claim, list the other creditors in Part 2.  habetical order according to the creditor's name.     | Do not deduct the value of collateral.                                | that supports this          | ter karegretikkenet  |
|  | induction of defined and the district of manifestation and  |   |                             | If any               |
| One Main Creditor's Name   | Describe the property that secures the claim:   | \$ <u>15,811.00</u>   | s 15,811.0                  | 0.00                 |
| PO BOX 1010  | Automobile  | THE STREET  |                             |                      |
| Number Street  |   | j   |                             |                      |
| 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-   | As of the date you file, the claim is: Check all that apply.  Contingent  |   |                             |                      |
| Evansville IN 47706  | Unliquidated  |   |                             |                      |
| City State ZIP Code  | ☐ Disputed  |   |                             |                      |
| Who owes the debt? Check one.  | Nature of lien. Check all that apply.   |   |                             |                      |
| Debtor 1 only Debtor 2 only  | An agreement you made (such as mortgage or secured car loan)  |   |                             |                      |
| Debtor 1 and Debtor 2 only   | Statutory lien (such as tax lien, mechanic's lien)  |   |                             |                      |
| At least one of the debtors and another  | Judgment lien from a lawsuit Other (including a right to offset)  |   |                             |                      |
| ☐ Check if this claim relates to a   | Other (including a right to offset)   | -   |                             |                      |
| community debt  Date debt was incurred 07/31/2015  | Last 4 digits of account number 5 4 3 7   |   |                             |                      |
| PNC Bank   | Describe the property that secures the claim:   | \$ 14,687.00  | s 14,687.00                 | 0.00 s               |
| Creditor's Name  |   | ]   | -                           |                      |
| PO BOX 3180  | Automobile  |   |                             |                      |
| Number Street  | As of the date you file, the claim is: Check all that apply.  | j   |                             |                      |
| D. 4500  | Contingent  |   |                             |                      |
| Pittsburgh PA 15230 City State ZIP Code  | Unliquidated Disputed   |   |                             |                      |
| Who owes the debt? Check one.  | Nature of lien. Check all that apply.   |   |                             |                      |
| Debtor 1 only  | An agreement you made (such as mortgage or secured  |   |                             |                      |
| Debtor 2 only  | carloan)  |   |                             |                      |
| Debtor 1 and Debtor 2 only   | Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit                                  |   |                             |                      |
| At least one of the debtors and another  | Other (including a right to offset)   |   |                             |                      |
| Check if this claim relates to a community debt  |   |   |                             |                      |
| Date debt was incurred 05/05/2014  | Last 4 digits of account number 1 8 6 3   | godzingaman documiningamo donnor vizibilino ususalirkiliberur (2 2 ga |                             |                      |
| STATE OF THE PROPERTY OF THE P | olumn A on this page. Write that number here:   | s 30,498.00   |                             |                      |

Add the dollar value of your entries in Column A on this page. Write that number here:

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 23 of 60

David Wang Debtor 1 Case number (if known) First Name Column A **Additional Page** Value of collateral Amount of claim Unsecured Part 1: After listing any entries on this page, number them beginning with 2.3, followed Do not deduct the that supports this portion by 2.4, and so forth. value of collateral. claim If any Bank of America 33,284.00 33,284.00 0.00 Describe the property that secures the claim: Creditor's Name PO BOX 45144 Automobile Number As of the date you file, the claim is: Check all that apply. 32231 Jacksonville Contingent ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred 05/06/2016 Last 4 digits of account number 0 9 6 2 Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated State ZIP Code Disputed Who owes the debt? Check one Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 33,284.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. 63,782.00 Write that number here:

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 24 of 60

| Fill in this i     | nformation to id | lentify your case:              |           |  |
|--------------------|------------------|---------------------------------|-----------|--|
| Debtor 1           | David            |                                 | Wang      |  |
|                    | First Name       | Middle Name                     | Last Name |  |
| Debtor 2           | Allie            | Shive                           | rs Wang   |  |
| (Spouse, if filing | ) First Name     | Middle Name                     | Last Name |  |
| United States      | Bankruptcy Court | for the: Northern District of I | Ilinois   |  |
| Case number        |                  |                                 |           |  |
| (if known)         |                  |                                 |           |  |

### Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

|             | Do any creditors have priority unsecured claims  | anainst vou?   |  |                    |                       |
|-------------|--|--|--|--------------------|-----------------------|
| 1.          | No. Go to Part 2.  | s agamst you:  |  |                    |                       |
|             | Yes.   |  |  |                    |                       |
| l.,         | Yes.   | editor has more than one priority unsecured claim, list the  | ne creditor sepa   | rately for eac     | h claim. For          |
|             | each claim listed, identify what type of claim it is. If   | a claim has both priority and nonpriority amounts, list the<br>claims in alphabetical order according to the creditor's na<br>Part 1. If more than one creditor holds a particular claim | at claim here ar<br>ame. If you have   | e more than t      | wo priority           |
| 1           | (For an explanation of each type of claim, see the i   | istructions for this form in the mendeboth booker.   | Total claim  | Priority<br>amount | Nonpriority<br>amount |
| 2.1         |  | Last 4 digits of account number  | \$   | . \$               | \$                    |
|             | Priority Creditor's Name   |  |  |                    |                       |
| -           |  | When was the debt incurred?  |  | •                  |                       |
| 1           | Number Street  | to that a data was file the eleim in Charle all that anni-   | ŕ  |                    |                       |
| 1           |  | As of the date you file, the claim is: Check all that apply  | •  |                    |                       |
| 4           | City State ZIP Code  | Contingent   |  |                    |                       |
| 1           | Who incurred the debt? Check one.  | ☐ Unliquidated ☐ Disputed  |  |                    |                       |
|             | Debtor 1 only  | ☐ Dispelled  |  |                    |                       |
| 2           | Debtor 2 only  | Type of PRIORITY unsecured claim:  |  |                    |                       |
| Commence of | Debtor 1 and Debtor 2 only   | Domestic support obligations   |  |                    |                       |
|             | At least one of the debtors and another  | Taxes and certain other debts you owe the government   |  |                    |                       |
|             | Check if this claim is for a community debt  | Claims for death or personal injury while you were intoxicated   |  |                    |                       |
| 4           | Is the claim subject to offset? ☐ No   | Other. Specify   |  |                    |                       |
|             | ☐ Yes  |  |  |                    |                       |
| 2.2         | A CONTROL OF THE PROPERTY OF T | Last 4 digits of account number  | and the second s | <b>*</b>           | e e                   |
| 2.2         | Priority Creditor's Name   |  | \$   | Þ                  | •                     |
|             | 110.11, 0.00.11  | When was the debt incurred?  |  |                    |                       |
| -           | Number Street  | As of the date you file, the claim is: Check all that apply  | ı.   |                    |                       |
|             |  | Contingent   |  |                    |                       |
|             | City State ZIP Code  | ☐ Unliquidated   |  |                    |                       |
|             | Chy  | ☐ Disputed   |  |                    |                       |
| 1           | Who incurred the debt? Check one.  Debtor 1 only   |  |  |                    |                       |
|             | Debtor 2 only  | Type of PRIORITY unsecured claim:  |  |                    |                       |
|             | Debtor 1 and Debtor 2 only   | <ul> <li>Domestic support obligations</li> <li>Taxes and certain other debts you owe the government</li> </ul>   |  |                    |                       |
|             | At least one of the debtors and another  | Taxes and certain other debts you owe the government  Claims for death or personal injury while you were   |  |                    |                       |
|             | Check if this claim is for a community debt  | intoxicated  |  |                    |                       |
| 1           | Is the claim subject to offset?  | Other. Specify   | _  |                    |                       |
|             | ☐ No<br>☐ Yes  |  |  |                    |                       |

Case 17-12259 Doc 1 Filed 04/19/17

Document

Entered 04/19/17 11:28:19 Desc Main Page 25 of 60

| Deb | ŀor | 1 |
|-----|-----|---|

David

Case number (if known)

List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Last 4 digits of account number 4 6 2 2 CitiBank 700.00 Nonpriority Creditor's Name 02/08/2017 When was the debt incurred? 701 East 60th Street Number Street SD 57104 North Sioux Falls As of the date you file, the claim is: Check all that apply. ZIP Code ☐ Contingent Who incurred the debt? Check one. Unliquidated Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify Bank Z No Yes 895,00 5 8 Last 4 digits of account number First Premier Bank 06/28/2015 When was the debt incurred? Nonpriority Creditor's Name 3820 N Louise Ave Number As of the date you file, the claim is: Check all that apply. 57107 SD Sioux Falls State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify Credit Card V No Yes Last 4 digits of account number 0 8 5 6 2,590.00 Bank Of America Nonpriority Creditor's Name 12/11/2014 When was the debt incurred? PO BOX 982238 Number TX 79998 El Paso As of the date you file, the claim is: Check all that apply. ZIP Code State Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only ☐ Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ₩ No Other, Specify Credit Card

☐ Yes

Document Wang

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Page 26 of 60

Debtor 1

| David |  |
|-------|--|
|       |  |

Middle Name

Last Name

Case number (if known)\_

Your NONPRIORITY Unsecured Claims - Continuation Page

|                  | g any entries on this page, r                                 | number the   | em beginning wit   | h 4.4, followed by 4.5, and so forth.  | Total claim                            |
|------------------|---|--|--|--|--|
|                  | tal One Bank USA NA   |  |  | Last 4 digits of account number 8 1 8 5  | s 2,275.00                             |
| -                | rity Creditor's Name<br>3OX 30281                             |  |  | When was the debt incurred? 11/07/2012   | ************************************** |
|                  | Street<br>Lake City   | UT   | 84130  | As of the date you file, the claim is: Check all that apply.   |  |
|                  | ncurred the debt? Check one, oter 1 only                      | State  | ZIP Code   | Contingent Unliquidated Disputed   |  |
|                  | otor 2 only<br>otor 1 and Debtor 2 only                       |  |  | Type of NONPRIORITY unsecured claim:   |  |
|                  | east one of the debtors and anothe                            | ŧΓ   |  | <ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>                            |  |
|                  | eck if this claim is for a commi                              | unity debt   |  | you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card |  |
| .5 Capit         | al One Bank USA NA  | noncent betterproperties to  | rifer terr å enstennenten enne skattistette klimation egiskette goldtentesig     | Last 4 digits of account number 1 7 0 4  | \$ <u>1,640.00</u>                     |
| PO B             | ty Creditor's Name<br>OX 30281                                |  |  | When was the debt incurred? 11/04/2013   |  |
| Number<br>Salt L | Street<br>ake City  | UT   | 84130  | As of the date you file, the claim is: Check all that apply.   |  |
| Debi             | curred the debt? Check one.<br>tor 1 only<br>tor 2 only       | State  | ZIP Code   | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:   |  |
|                  | tor 1 and Debtor 2 only<br>ast one of the debtors and another |  |  | <ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>                            |  |
|                  | ck if this claim is for a commu<br>laim subject to offset?    | nity debt  |  | you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card |  |
|                  | One Bank  | TO-PE COPYSIA - HIGHER PARK SHARE SH | entityste ark floweds his familie to his flowing have flower are not compared to | Last 4 digits of account number 7 3 3 4  | \$_1,538.00                            |
| РО ВО            | OX 98872  |  |  | When was the debt incurred? 03/27/2013   |  |
| Number<br>Las V  | Street<br>egas  | NV   | 89193  | As of the date you file, the claim is: Check all that apply.   |  |
|                  | urred the debt? Check one.                                    | State  | ZIP Code   | ☐ Contingent ☐ Unliquidated ☐ Disputed   |  |
| Debto            |   |  |  | Type of NONPRIORITY unsecured claim:   |  |
|                  | or 1 and Debtor 2 only<br>ast one of the debtors and another  |  |  | <ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>                            |  |
| ☐ Chec           | k if this claim is for a commur                               | nity debt  |  | you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts                             |  |
| Is the cla       | aim subject to offset?  |  |  | Other. Specify Credit Card   |  |

Debtor 1

David First Name

Middle Name

Document Last Name

Page 27 of 60 Case number (if known)\_

| the set | • |
|---------|---|
| T HIL   |   |

Your NONPRIORITY Unsecured Claims — Continuation Page

| The state of the s |  | The Control of the Co |  |                    |
|--|--|--|--|--------------------|
| Dr. Leonards   | 1  |  | Last 4 digits of account number 5 1 2 2  | <sub>\$</sub> 208. |
| Nonpriority Creditor's Name PO BOX 2845  |  |  | When was the debt incurred? 07/15/2014   |                    |
| Number Street<br>Monroe  | WI   | 53566  | As of the date you file, the claim is: Check all that apply.   |                    |
| City   | State  | ZIP Code   | Contingent   |                    |
| Who incurred the debt? Check one.  |  |  | ☐ Unliquidated ☐ Disputed  |                    |
| Debtor 1 only  |  |  | C Disputed   |                    |
| Debtor 2 only Debtor 1 and Debtor 2 only   |  |  | Type of NONPRIORITY unsecured claim:   |                    |
| At least one of the debtors and anothe   | :r   |  | <ul> <li>☑ Student loans</li> <li>☑ Obligations arising out of a separation agreement or divorce that</li> </ul> |                    |
| ☐ Check if this claim is for a comm  | unitv debt                                       |  | you did not report as priority claims  |                    |
| s the claim subject to offset?   |  |  | Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Charge Account                 |                    |
| <b>√</b> No  |  |  | other. Specify Charge Account  |                    |
| Yes  |  |  |  |                    |
| First Premier Bank   | neti ir i motesti ir pediroka kartotom           | ethellisethels in the second second will all announces and a second  | Last 4 digits of account number 2 4 9 2  | s 1,026.           |
| Instit retifier Dank  Nonpriority Creditor's Name  |  |  | 05/00/0044   | <u> </u>           |
| 3820 N Louise Ave  |  |  | When was the debt incurred? U5/U6/2014   |                    |
| lumber Street<br>Sioux Falls   | SD   | 57107  | As of the date you file, the claim is: Check all that apply.   |                    |
| Dity   | State  | ZIP Code   | Contingent   |                    |
| Vho incurred the debt? Check one.  |  |  | ☐ Unliquidated ☐ Disputed  |                    |
| ☑ Debtor 1 only  |  |  |  |                    |
| Debtor 2 only Debtor 1 and Debtor 2 only   |  |  | Type of NONPRIORITY unsecured claim:   |                    |
| ■ Deptor 1 and Deptor 2 only At least one of the debtors and another   |  |  | Student loans  |                    |
| Check if this claim is for a commu   | nitv deht  |  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims          |                    |
| s the claim subject to offset?   | mily debt  |  | ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card                 |                    |
| M No   |  |  | Other Specify Credit Card  |                    |
| ] Yes  |  |  |  |                    |
| First Savings Credit Car   | make garamajang kanti kaketang ginangkangjarjen. |  | Last 4 digits of account number 7 2 3 3  | s 546.0            |
| onpriority Creditor's Name   |  |  | When was the debt incurred? 05/07/2015   |                    |
| umber Street   |  |  | As of the date you file, the claim is: Check all that apply.   |                    |
| Sioux Falls  | SD<br>State                                      | 57104<br>ZIP Code  | Contingent   |                    |
|  |  |  | ☐ Unliquidated   |                    |
| /ho incurred the debt? Check one.  |  |  | ☐ Disputed   |                    |
| Debtor 1 only Debtor 2 only  |  |  | Type of NONPRIORITY unsecured claim:   |                    |
| Debtor 1 and Debtor 2 only   |  |  | ☐ Student loans  |                    |
| At least one of the debtors and another  |  |  | Obligations arising out of a separation agreement or divorce that  |                    |
| Check if this claim is for a commu   | nity debt  |  | you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts         |                    |
| the claim subject to offset?   |  |  | Other. Specify Credit Card   |                    |
| No   |  |  |  |                    |

Debtor 1

David

Page 28 of 60

Document Wang Middle Name Last Name

Case number (if known)\_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| SST/CIGPFI Corp  |   |  | Last 4 digits of account number 1 6 3 7  | s 1,921              |
|--|---|--|--|----------------------|
| Nonpriority Creditor's Name 4315 Pickett Road  |   |  | When was the debt incurred? 03/15/2004   | <u> </u>             |
| Number Street Saint Joseph   | МО  | 64503  | <ul> <li>As of the date you file, the claim is: Check all that apply.</li> </ul>   |                      |
| Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  | State   | ZIP Code   | ☐ Contingent ☐ Unliquidated ☐ Disputed   |                      |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a commun       |   |  | Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                      |
| Is the claim subject to offset?  No Yes  | ity debt  |  | Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card  |                      |
| TD Bank USA/Target Credit  | ettaken alleg der blage, er jage gene j             | autori e ed. et e elektrikotti ketti elektrikotti ketti elektrikotti etti elektrikotti etti elektrikotti ketti | Last 4 digits of account number 7 0 6 8  | s808.                |
| Nonpriority Creditor's Name PO BOX 673   |   |  | When was the debt incurred? 05/05/2015   | -                    |
| Number Street Minneapolis  | MN  | 55440  | As of the date you file, the claim is: Check all that apply.   |                      |
| City   | State   | ZIP Code   | Contingent   |                      |
| Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  |   |  | ☐ Unliquidated ☐ Disputed ☐ Type of NONPRIORITY unsecured claim:   |                      |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a communit | tu dobt   |  | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims                                    |                      |
| s the claim subject to offset?  No Yes   | ty debt   |  | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card   |                      |
| WebBank FingerHut  | ug bil left gemiligen i verzonet s (ens), vezobelek | · # Cant 1946 - 1954   128   127   128   127   128   128   128   128   128   128   128   128   128   128   128 | Last 4 digits of account number 7 6 7 3  | <sub>\$_1,387.</sub> |
| Jonnority Creditor's Name 6250 Ridgewood Road  |   |  | When was the debt incurred? 04/01/2015   |                      |
|  | MN  | 56303  | As of the date you file, the claim is: Check all that apply.   |                      |
|  | tate  | ZIP Code   | ☐ Contingent ☐ Unliquidated  |                      |
| Vho incurred the debt? Check one.  Debtor 1 only   |   |  | ☐ Disputed   |                      |
| Debtor 2 only  |   |  | Type of NONPRIORITY unsecured claim:   |                      |
| Debtor 1 and Debtor 2 only   |   |  | ☐ Student loans  |                      |
| At least one of the debtors and another  Check if this claim is for a community                                | u dobt  |  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |                      |
| ·  | y cept  |  | Debts to pension or profit-sharing plans, and other similar debts  |                      |
| the claim subject to offset?<br>Ino<br>Yes   |   |  | ☑ Other Specify Charge Account   |                      |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 29 of 60

Debtor 1

| David |  |
|-------|--|
|       |  |

Middle Name

Case number (if known)\_\_

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

| 4           |   |            |  |  |                 |
|-------------|---|------------|--|--|-----------------|
|             | irst National Credit CA   |            |  | Last 4 digits of account number 0 3 1 4  | \$ <u>351.0</u> |
| 5           | 00 E 60th St N  |            |  | When was the debt incurred? 06/08/2016   |                 |
|             | mber Street<br>ioux Falis   | SD         | 57104  | As of the date you file, the claim is: Check all that apply.   |                 |
| City        |   | State      | ZIP Code   | Contingent   |                 |
| W           | ho incurred the debt? Check one.                                      |            |  | ☐ Unliquidated   |                 |
|             | Debtor 1 only   |            |  | ☐ Disputed   |                 |
|             | Debtor 2 only   |            |  | Type of NONPRIORITY unsecured claim:   |                 |
|             | Debtor 1 and Debtor 2 only  |            |  | Student loans  |                 |
|             | At least one of the debtors and anothe                                | r          |  | Obligations arising out of a separation agreement or divorce that  |                 |
|             | Check if this claim is for a commu                                    | inity debt |  | you did not report as priority claims  |                 |
|             | the claim subject to offset?  | •          |  | Debts to pension or profit-sharing plans, and other similar debts  |                 |
|             | No  |            |  | ☑ Other Specify <u>Credit Card</u>   |                 |
|             | Yes   |            |  |  |                 |
| Ar          | nthony Merza, M.D.P.C   |            | method (Standard Marie and Alliand Color Standard Marie and Allian | Last 4 digits of account number 7 3 2 6  | \$34.0          |
|             | priority Creditor's Name<br>501 W 78th St, Suite 400                  |            |  | When was the debt incurred? 01/11/2016   |                 |
| Num         | nber Street   |            |  | An of the date very file the all-limits Over 1000  |                 |
| BL          | ırbank  | <u>IL</u>  | 60459  | As of the date you file, the claim is: Check all that apply.   |                 |
| City        |   | State      | ZIP Code   | ☐ Contingent ☐ Unliquidated  |                 |
| Wh          | o incurred the debt? Check one.                                       |            |  | Disputed   |                 |
|             | Debtor 1 only   |            |  | — <b></b>  |                 |
|             | Debtor 2 only   |            |  | Type of NONPRIORITY unsecured claim:   |                 |
|             | Debtor 1 and Debtor 2 only<br>At least one of the debtors and another |            |  | ☐ Student loans  |                 |
|             |   |            |  | Obligations arising out of a separation agreement or divorce that  |                 |
| <b>U</b> (  | Check if this claim is for a commu                                    | nity debt  |  | you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts |                 |
|             | ne claim subject to offset?   |            |  | Other. Specify Medical   |                 |
|             |   |            |  |  |                 |
| garantinau. |   |            | g Clarific to the section of the entry till classiful for Sing China, beneficially silling his   |  | ¢ 654.00        |
| Dir         | ect Change  |            |  | Last 4 digits of account number 2 1 2 0  | \$034.00        |
| •           | riority Creditor's Name   |            |  | When was the debt incurred? 03/15/2017   |                 |
| 111<br>Numb | 12 7th Ave  |            | · · · · · · · · · · · · · · · · · · ·  |  |                 |
|             | nroe  | WI         | 53566  | As of the date you file, the claim is: Check all that apply.   |                 |
| City        |   | State      | ZIP Code   | Contingent   |                 |
| Who         | incurred the debt? Check one.   |            |  | Unliquidated   |                 |
|             | Debtor 1 only   |            |  | ☐ Disputed   |                 |
|             | Debtor 2 only   |            |  | Type of NONPRIORITY unsecured claim:   |                 |
|             | Debtor 1 and Debtor 2 only  |            |  | Student loans  |                 |
|             | at least one of the debtors and another                               |            |  | Obligations arising out of a separation agreement or divorce that  |                 |
| Q c         | heck if this claim is for a commun                                    | ity debt   |  | you did not report as priority claims  |                 |
|             | e claim subject to offset?  | <b>-</b>   |  | Debts to pension or profit-sharing plans, and other similar debts  |                 |
| <b>☑</b> N  |   |            |  | ☑ Other. Specify_Charge Account  |                 |
| ***         | es  |            |  |  |                 |

Last Name

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Page 30 of 60

Debtor 1

First Name

Middle Name

Document Wang

Case number (if known)\_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

|     | 7  |  |   | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1   |   |
|-----|--|--|---|--|---|
| 5.7 | J FC&A   |  |   | Last 4 digits of account number 4 1 9 5  | s 38.00   |
|     | Nonpriority Creditor's Name PO BOX 2062  Number Street   |  |   | When was the debt incurred? 02/13/2017   | -   |
|     | Peachtree City   | GA                                     | 30269   | As of the date you file, the claim is: Check all that apply.   |   |
|     | City   | State                                  | ZIP Code  | Contingent   |   |
| !   | Who incurred the debt? Check of  |  |   | Unliquidated   |   |
|     | Debtor 1 only  | one.                                   |   | ☐ Disputed   |   |
|     | Debtor 2 only  |  |   | Type of NONDRIGHTY upge average delains  |   |
|     | Debtor 1 and Debtor 2 only   |  |   | Type of NONPRIORITY unsecured claim:   |   |
|     | At least one of the debtors and  | another                                |   | Student loans  |   |
|     | ☐ Check if this claim is for a c   | ommunity debt                          |   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |   |
|     | Is the claim subject to offset?  | ommunity debt                          |   | Debts to pension or profit-sharing plans, and other similar debts  |   |
|     | No   |  |   | Other. Specify Charge Account  |   |
|     | Yes  |  |   |  |   |
| 5.8 | Till start at the field the start till te material start at the start for the start at the start |  | ont angles y pa indicatoristic petrotal and that high experience circumstances that project |  | n berninkels klonemen vengrassinssissassissephenisphinisphinisphinisphis  |
|     | Ginny's  |  |   | Last 4 digits of account number $2630$   | s <u>294.00</u>   |
| 1   | Nonpriority Creditor's Name  |  |   | When was the debt incurred? 03/20/2017   |   |
| 1   | 1112 7th Avenue Number Street  |  |   | When was the dept intuited?  |   |
|     | Monroe   | WI                                     | 53566   | As of the date you file, the claim is: Check all that apply.   |   |
| :   | City   | State                                  | ZIP Code  | Contingent   |   |
|     | Miles in succeed the state (0.0)   |  |   | Unliquidated   |   |
|     | Who incurred the debt? Check of  | ne.                                    |   | ☐ Disputed   |   |
|     | Debtor 1 only  Debtor 2 only   |  |   | Time of NONDOLOBITY and a second of the  |   |
|     | Debtor 1 and Debtor 2 only   |  |   | Type of NONPRIORITY unsecured claim:   |   |
| 1   | At least one of the debtors and a  | nother                                 |   | Student loans  |   |
|     | Check if this claim is for a co  |  |   | Obligations arising out of a separation agreement or divorce that<br>you did not report as priority claims   |   |
|     |  | mmunity dept                           |   | Debts to pension or profit-sharing plans, and other similar debts  |   |
|     | is the claim subject to offset?  |  |   | Other. Specify Charge Account  |   |
|     | No No  |  |   |  |   |
|     |  | ************************************** | nn ann fanns Lankann a i'i 2000 Lankann a 100 gaard a 100 gaard a na Lankann gar ga         |  | in and a second   |
| 5.9 | Bethany Homes And Meth   | vadiet Haenit                          | <b>.</b> 1  | Last 4 digits of account number 7 7 7 0 7  | \$286.00  |
|     | Nonpriority Creditor's Name  | iodiaci ioapile                        | ai  | 04/00/0047   |   |
|     | PO BOX 985   |  |   | When was the debt incurred? 01/30/2017   | 1.00  |
|     | Number Street  |  | 00400   | As of the date you file, the claim is: Check all that apply.   | three and the second  |
|     | Bensenville  | IL<br>State                            | 60106<br>ZIP Code   |  | Commenced Living  |
|     | <del></del> y  | State                                  | air Code  | Contingent Unliquidated  | ato and address;  |
|     | Who incurred the debt? Check on  | e.                                     |   | Disputed   | vallority   |
|     | Debtor 1 only  |  |   | ·  | Average   |
|     | Debtor 2 only  |  |   | Type of NONPRIORITY unsecured claim:   | and the second of   |
|     | Debtor 1 and Debtor 2 only  At least one of the debtors and an   | athar                                  |   | Student loans  | WORLD AND ADDRESS OF THE PARTY |
|     |  |  |   | Obligations arising out of a separation agreement or divorce that  | u ne dipidado.  |
|     | Check if this claim is for a col   | mmunity debt                           |   | you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts   | от петелолого   |
|     | Is the claim subject to offset?  |  |   | Other, Specify Medical   | mananaga,   |
|     | ☑ No   |  |   | • Programme descriptions of the control of the cont |   |
|     | Yes  |  |   |  |   |

Page 31 of 60

Debtor 1

| David |  |  |
|-------|--|--|

Document Wang

Case number (if known)\_

First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

| Midwest Imaging Profes  | sionals  | ,  | Last 4 digits of account number $0 5 2 5$  | s 1          |
|---|--|--|--|--------------|
| Nonpriority Creditor's Name PO BOX 371863   | , , , , , , , , , , , , , , , , , , ,  | <u> </u>   | When was the debt incurred? 01/25/2017   | V            |
| Number Street Pittsburgh  | PA   | 15250  | — As of the date you file, the claim is: Check all that apply.   |              |
| City  Who incurred the debt? Check  Debtor 1 only  Debtor 2 only Debtor 1 and Debtor 2 only   |  | ZIP Code   | ☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans   |              |
| ☐ At least one of the debtors and☐ Check if this claim is for a ls the claim subject to offset?☐ No☐ Yes  |  |  | <ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify Medical</li> </ul> |              |
| Monroe And Main   | ritima. Maria 1770 ilijaning di iki ilijangan kurilinan di iki mang dilamba da di matikang mbawasa s | o - Kiril kiri ifiril diliyet biş işibil iliyeni biş işibil iliyeni iliyetek ile işibil iliyeni iliyetek ile i | Last 4 digits of account number $\underline{2}$ $\underline{1}$ $\underline{0}$  | s <u>31;</u> |
| 1112 7th Avenue   |  |  | When was the debt incurred? 03/20/2017   |              |
| Number Street<br>Monroe   | WI   | 53566  | As of the date you file, the claim is: Check all that apply.   |              |
| City  Who incurred the debt? Check  |  | ZIP Code   | Contingent Uniliquidated   |              |
| Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  |  |  | ☐ Disputed  Type of NONPRIORITY unsecured claim:   |              |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and ☐ Check if this claim is for a c   |  |  | <ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>   |              |
| s the claim subject to offset?<br>✓ No  ☐ Yes   |  |  | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Charge Account  |              |
| Prima and income a constraint of the constraint | elikka tibetianika nefandarili. Atawa taurih menaka-melanta-talah salah ketenya                      | ky (l. 700ar Llamachandyan(hyny)lyry)lib da hrybynyn g'adrolyr-Llana   | Last 4 digits of account number 2 2 9 W  | s403         |
| Montgomery Wards<br>tonpriority Creditor's Name<br>1112 7th Avenue  | AAAAAAA AAAAAAAA AAAAAAAAAAAAAAAAAAAAA   |  | When was the debt incurred? 03/20/2017   |              |
| lumber Street<br>Monroe   | WI   | 53566  | As of the date you file, the claim is: Check all that apply.   |              |
| Oity  Who incurred the debt? Check o  |  | ZIP Code   | ☐ Contingent ☐ Unliquidated  |              |
| Debtor 1 only Debtor 2 only   |  |  | Disputed  Type of NONDBIORITY upgequired glaim:  |              |
| Debtor 2 only  Debtor 1 and Debtor 2 only   |  |  | Type of NONPRIORITY unsecured claim:  Student loans  |              |
| At least one of the debtors and a   |  |  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |              |
| ☐ Check if this claim is for a co<br>the claim subject to offset?   | mmunity debt   |  | Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Charge Account   |              |

Case 17-12259 Doc 1 Document Wang

Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Page 32 of 60

Debtor 1

David First Name

Middle Name

Last Name

Case number (if known)

| Afte | r listing any entries on this page,  | , number th  | em beginning wit   | h 4.4, followed by 4.5, and so forth.   | Tota  | l claim  |
|------|--|--|--|---|-------|--|
| 6.4  | NorthWestern Memorial Ho   | spital   |  | Last 4 digits of account number 7 0 0 1   | \$    | 177.00   |
|      | Nonpriority Creditor's Name  |  |  | When was the debt incurred? 04/23/2015  |       |  |
|      | PO BOX 73690<br>Number Street  |  |  | <del>-</del>  |       |  |
|      | Chicago  | IL   | 60673  | As of the date you file, the claim is: Check all that apply.  |       |  |
|      | City   | State  | ZIP Code   | Contingent  |       |  |
|      | Who incurred the debt? Check one.  |  |  | ☐ Unliquidated ☐ Disputed   |       |  |
|      | Debtor 1 only  |  |  | □ Disputed  |       |  |
|      | Debtor 2 only  |  |  | Type of NONPRIORITY unsecured claim:  |       |  |
|      | Debtor 1 and Debtor 2 only   |  |  | Student loans   |       |  |
|      | At least one of the debtors and anot   | her  |  | Obligations arising out of a separation agreement or divorce that   |       |  |
|      | ☐ Check if this claim is for a com   | munity debt  |  | you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts                        |       |  |
|      | Is the claim subject to offset?  |  |  | Other, Specify Medical  |       |  |
|      | M No   |  |  |   |       |  |
|      | ☐ Yes  |  |  |   |       |  |
| 5.5  | Publishers Clearing House  | the colorection with the color of the colorection o | garage en la company de la   | Last 4 digits of account number 2 7 7 0   | s1    | 142.00   |
|      | Nonpriority Creditor's Name  |  |  |   |       |  |
|      | PO BOX 6344  |  |  | When was the debt incurred? $08/26/2013$  |       |  |
|      | Number Street  |  | E4500  | As of the date you file, the claim is: Check all that apply.  |       |  |
|      | Harlan<br>City   | IA<br>State  | 51593<br>ZIP Code  |   |       |  |
|      | City   | State  | 2/P Code   | <ul><li>☐ Contingent</li><li>☐ Unliquidated</li></ul>   |       |  |
|      | Who incurred the debt? Check one.  |  |  | Disputed  |       |  |
|      | Debtor 1 only  |  |  |   |       |  |
|      | Debtor 2 only  |  |  | Type of NONPRIORITY unsecured claim:  |       |  |
|      | Debtor 1 and Debtor 2 only   |  |  | Student loans   |       |  |
|      | At least one of the debtors and anoth  | ner  |  | <ul> <li>Obligations arising out of a separation agreement or divorce that<br/>you did not report as priority claims</li> </ul> |       |  |
|      | Check if this claim is for a comr  | nunity debt  |  | Debts to pension or profit-sharing plans, and other similar debts   |       |  |
|      | Is the claim subject to offset?  |  |  | Other Specify Collection Account  |       | PARTIE DE LA PROPERTIE DE LA P |
|      | ☑ No   |  |  |   |       |  |
|      | ☐ Yes  |  |  |   |       | T T T T T T T T T T T T T T T T T T T  |
| .6   | rd kweenda waxaa ahada ah Ahaa iyo daday iyo qoraa ah ahaa ahaa ahaa ah ahaa ah ahaa ah ah | icazon Francisco (Companyo (Companyo (Companyo (Companyo (Companyo (Companyo (Companyo (Companyo (Companyo (Co   | N L BYTONIA, COPY COMMON PROPERTY AND AND THE STATE OF TH | 8 5 7 0   | s 1,1 | 45.00  |
|      | Seventh Avenue   |  |  | Last 4 digits of account number 8 5 7 0   |       | 1  |
|      | Nonpriority Creditor's Name  |  |  | When was the debt incurred? 08/22/2012  |       | - Transition   |
|      | 1515 S 21st St<br>Number Street  |  |  | As of the data was the the status in Class of the status  |       | -  |
|      | Clinton  | IA   | 53566  | As of the date you file, the claim is: Check all that apply.  |       | al and a second  |
| i    | City   | State  | ZIP Code   | Contingent  |       | Ì  |
| ,    | Who incurred the debt? Check one.  |  |  | Unliquidated  |       | Sept.  |
|      | Debtor 1 only  |  |  | ☐ Disputed  |       |  |
|      | Debtor 2 only  |  |  | Type of NONPRIORITY unsecured claim:  |       | ***  |
|      | Debtor 1 and Debtor 2 only   |  |  | ☐ Student loans   |       | nga homanaa.   |
|      | At least one of the debtors and anoth  | ner  |  | Obligations arising out of a separation agreement or divorce that   |       | - Translation  |
|      | Check if this claim is for a comm  | nunity debt  |  | you did not report as priority claims   |       | an bloton or   |
|      | is the claim subject to offset?  |  |  | Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Charge Account                                |       | er (veltuelines)   |
|      | is the claim subject to offset?  |  |  | Other, Specify Offdide Account  |       | ***************************************  |
| i    | NO SEE INC   |  |  |   |       | į  |

Yes

Case 17-12259

Document Wang

Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Page 33 of 60

Debtor 1

| David      |
|------------|
| First Name |

Middle Name

Last Name

Case number (if known)\_

|  | Your NONPRIORITY Unse   |   |  |   | Total claim |
|--|---|---|--|---|-------------|
| 6.7  | SYNCB/Walmart   | and the second  | <u>.</u>   | Last 4 digits of account number 8 2 7 1   | s 894.00    |
|  | Nonpriority Creditor's Name PO BOX 965024   |   |  | When was the debt incurred? $02/11/2016$  |             |
|  | Number Street Orlando   | FL  | 32896  | As of the date you file, the claim is: Check all that apply.  |             |
| de de comme co compaño e color de como de como de como   | City  Who incurred the debt? Check one.   | State   | ZIP Code   | Contingent Unliquidated Disputed  |             |
|  | Debtor 1 only  Debtor 2 only  |   |  | Type of NONPRIORITY unsecured claim:  |             |
| e en contra a till attribute til en empera a ta a  | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commu |   |  | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims       |             |
| emelyk deki ppinteliski k kinnik si iAAAndunwykim  | Is the claim subject to offset?  ☑ No ☑ Yes   |   |  | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Charge Account                             |             |
| 6.8  | Turner Acceptance   | entiller of the Estimate that the estimate the estimate the | rd <sub>is</sub> aalayeerih ali <u>s</u> aalih dissaasiin qiliyoogii ee S eriisaasiid 50 km iisaariha qiiingad   | Last 4 digits of account number 5 0 1 0   | \$_2,380.00 |
| AND AND AND ROOMS COMMISSION   | Nonpriority Creditor's Name 5900 W Howard Street  |   |  | When was the debt incurred? 06/11/2016  |             |
|  | Number Street Skokie  | IL.   | 60077  | As of the date you file, the claim is: Check all that apply.  |             |
|  | City  Who incurred the debt? Check one.   | State   | ZIP Code   | <ul><li>Contingent</li><li>Unliquidated</li><li>Disputed</li></ul>  |             |
| (many or poster) and province of the poster  | ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only  |   |  | Type of NONPRIORITY unsecured claim:  |             |
| 1  | At least one of the debtors and another   |   |  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims                         |             |
| A Marketin and A San   | ☐ Check if this claim is for a commu Is the claim subject to offset?  ☑ No                            | nity debt   |  | Debts to pension or profit-sharing plans, and other similar debts  Other, Specify Installment Account                           |             |
|  | Yes   |   |  |   |             |
| 6.9  | SYNCB/Care Credit   |   | and good of the control of the contr | Last 4 digits of account number 5 2 0 5   | \$_3,943.00 |
|  | Nonpriority Creditor's Name PO BOX 965036   |   |  | When was the debt incurred? 03/04/2016  |             |
|  | Number Street Orlando   | FL  | 32896  | As of the date you file, the claim is: Check all that apply.  |             |
| Add the State of the late of t | City  Who incurred the debt? Check one.   | State   | ZIP Code   | Contingent Unliquidated Disputed  |             |
|  | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  |   |  | Type of <b>NONPRIORITY</b> unsecured claim:   Student loans   |             |
|  | At least one of the debtors and another   | nist, edabs   |  | <ul> <li>Obligations arising out of a separation agreement or divorce that<br/>you did not report as priority claims</li> </ul> |             |
| 5  | ☐ Check if this claim is for a commuls the claim subject to offset? ☐ No ☐ Yes                        | mty debt  |  | Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Charge Account                                |             |

Case 17-12259 Doc 1 Filed 04/19/17 Document Wang

Entered 04/19/17 11:28:19 Desc Main Page 34 of 60

Debtor 1

David

Case number (if know

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page Total claim After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. 7.1 Last 4 digits of account number 1 7 7 1 308.00 Capital One Bank USA NA Nonpriority Creditor's Name 05/28/2016 When was the debt incurred? PO BOX 30281 Number As of the date you file, the claim is: Check all that apply. UT 84130 Salt Lake City Contingent State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other Specify Credit Card ₩ No ☐ Yes 7.2 Last 4 digits of account number 1 1 0 4 251.00 Comenity Capital/HSN Nonpriority Creditor's Name 01/19/2016 When was the debt incurred? PO BOX 182120 Number As of the date you file, the claim is: Check all that apply. 43218 Columbus OH ZIP Code State Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify Charge Account Mo No ☐ Yes 409.00 7.3 Last 4 digits of account number 5 9 2 4 Credit One Bank Nonpriority Creditor's Name 09/13/2015 When was the debt incurred? PO BOX 98872 Number As of the date you file, the claim is: Check all that apply. Las Vegas NV 89193 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify Credit Card **☑** No ☐ Yes

Case 17-12259 Doc 1 Filed 04/19/17 Document

Entered 04/19/17 11:28:19 Desc Main Page 35 of 60

Debtor 1

David

First Name Middle Name Wang

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number 8 4 2 7 41.00 Dr. Leonards Nonpriority Creditor's Name 03/22/2016 When was the debt incurred? PO BOX 2845 Number As of the date you file, the claim is: Check all that apply. WI 53566 Monroe ZIP Code State Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☑ Other, Specify Medical ₩ No ☐ Yes 7.5 Last 4 digits of account number 6 5 0 6 857.00 Stoneberry Nonpriority Creditor's Name 03/15/2017 When was the debt incurred? PO BOX 2820 Number As of the date you file, the claim is: Check all that apply. WI 53566 Monroe State ZIP Code City Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify Charge Account ₩ No Yes 61.00 7.6 Last 4 digits of account number 0 5 2 5 Thorek Memorial Hospital Nonpriority Creditor's Name 01/25/2017 When was the debt incurred? 2727 Paysphere Circle As of the date you file, the claim is: Check all that apply. IL 60674 Chicago State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other, Specify Medical

**☑** No Yes

Debtor 1

David First Name Document Wang

Case number (if known)

Your NONPRIORITY Unsecured Claims - Continuation Page

| When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical  Last 4 digits of account number 4 9 0 0 When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection Account | \$ <u>1,0</u>  |
|--|--|
| □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical  Last 4 digits of account number 4 9 0 0  When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts  | \$\$   |
| □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical  Last 4 digits of account number 4 9 0 0  When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts  | \$1,C  |
| Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical  Last 4 digits of account number 4 9 0 0 When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  | \$ <u>1,0</u>  |
| Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical  Last 4 digits of account number 4 9 0 0 When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts   | \$_1,0   |
| Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical  Last 4 digits of account number 4 9 0 0 When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts   | \$ <u>1,0</u>  |
| □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical  Last 4 digits of account number 4 9 0 0  When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts   | \$ <u>1,0</u>  |
| □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical  Last 4 digits of account number 4 9 0 0  When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts   | \$ <u>1,0</u>  |
| □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical  Last 4 digits of account number 4 9 0 0  When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts   | \$ <u>1,0</u>  |
| you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical  Last 4 digits of account number 4 9 0 0  When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts   | \$ <u>1,0</u>  |
| Last 4 digits of account number 4 9 0 0  When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts   | \$ <u>1,0</u>  |
| Last 4 digits of account number 4 9 0 0  When was the debt incurred? 03/21/2017  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts   | \$ <u>1,0</u>  |
| When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts   | \$ <u>1,0</u>  |
| When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts   | \$ <u>1,0</u>  |
| As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did  |  |
| As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  |  |
| <ul> <li>□ Contingent</li> <li>□ Unliquidated</li> <li>□ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>□ Student loans</li> <li>□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> </ul>  |  |
| <ul> <li>☐ Unliquidated</li> <li>☐ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> </ul>  |  |
| <ul> <li>□ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>□ Student loans</li> <li>□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> </ul>  |  |
| Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  |  |
| <ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>  |  |
| <ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>  |  |
| <ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>   |  |
| you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts   |  |
| Debts to pension or profit-sharing plans, and other similar debts  |  |
|  |  |
| Other Specify Collection Account   |  |
| Last 4 digits of account number 0 3 6 9  | \$ 3,4   |
| When was the debt incurred? 12/01/2015   |  |
| When was the debt incurred? 12/01/2015   |  |
| As of the date you file, the claim is: Check all that apply.   |  |
| Contingent   |  |
| ☐ Unliquidated   |  |
| ☐ Disputed   |  |
| Type of NONDBIODITY upgested disim-  |  |
| · · ·  |  |
|  |  |
| you did not report as priority claims  |  |
| Debts to pension or profit-sharing plans, and other similar debts  |  |
|  |  |
|  | <ul> <li>☐ Unliquidated</li> <li>☐ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul> |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 37 of 60

Debtor 1

| David |
|-------|
|       |

First Name

Wang Middle Name

Case number (if known)\_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

| FirstSource Advanta   | ge, LLC  | ·····  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
|---|--|--|--|
| PO BOX 628  |  |  | Line 4.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number Street   |  |  | □ Part 2: Creditors with Nonpriority Unsecured Claims  |
| Buffalo   | N/N/   | 44040  | Last 4 digits of account number 1 1 7 3  |
| City  | NY<br>State                                      | 14240<br>ZIP Code                              | -  |
| CCb Credit Services,  | embandeanenen en spilante, en et skillbereksen   | olykepentas sää kirokkousassaa apaikatapiess   | The contract of the contract o |
| Name  | , 1110   |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| PO BOX 272  |  |  | Line 4.2 of (Check one): 🔽 Part 1: Creditors with Priority Unsecured Claims  |
| Number Street   | ***************************************          |  | Part 2: Creditors with Nonpriority Unsecured   |
|   |  | · · · · · · · · · · · · · · · · · · ·          | Claims   |
| Springfield<br>Dity   | IL<br>State                                      | 62705<br>ZIP Code                              | Last 4 digits of account number 5 8 9 1  |
| Bethany Homes And   | Methodist Ho                                     | spital   | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| PO BOX 985  |  |  | Line 5.9 of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| lumber Street   |  |  | Part 2: Creditors with Nonpriority Unsecured   |
|   |  |  | Claims Claims  |
| Bensenville<br>ity  | IL<br>State                                      | 60106<br>ZIP Code                              | Last 4 digits of account number 7 7 0 7  |
| Penn Credit   | waninkii vir kinaciti ytw.vkz s⊃di valesti vir m | minimizara e e e e e e e e e e e e e e e e e e | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| 916 S 14th St   |  |  | Line 6.5 of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| umber Street  | <del></del>                                      |  | Part 2: Creditors with Nonpriority Unsecured   |
| PO BOX 988  |  |  | Claims Claims  |
| -<br>Harrisburg   | PA   | 17108  | Last 4 digits of account number 2 3 2 0  |
| ty<br>www.negonologic | State  | ZIP Code                                       |  |
| /an Ru Credit Corpor  | ration   |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| l350 E Touhy Ave, St  | te 300E  |  | Line 6.6 of (Check one):   Part 1: Creditors with Priority Unsecured Claims  |
| umber Street  |  | <del></del>                                    | Part 2: Creditors with Nonpriority Unsecured   |
|   |  |  | Claims   |
| Des Plaines   | IL   | 60018  | Last 4 digits of account number 4 9 2 0  |
|   | State  | ZIP Code                                       |  |
| .C. System, Inc   |  |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| PO BOX 64378  |  |  | Line 7.5 of (Check one):   ✓ Part 1: Creditors with Priority Unsecured Claims  |
| imber Street  |  | ***************************************        | ☐ Part 2: Creditors with Nonpriority Unsecured   |
|   |  |  | Claims   |
| Saint Paul  | MN<br>State                                      | 55164<br>ZIP Code                              | Last 4 digits of account number 2 1 7 9  |
| latentine 8   | Kebarta  | astro  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| 10. Pox 32  | 25   |  | Line 🗘 of (Check one): 🗖 Part 1: Creditors with Priority Unsecured Claims  |
| mber Street   |  | 7411476-11476                                  | Part 2: Creditors with Nonpriority Unsecured   |
|   |  |  | Claims   |
| awrence   | MA Or  | 842  | Last 4 digits of account number $ \triangle                                  $   |
| у `   | State  | ZIP Code                                       | Fast + digits of account number () () ()   |

Document

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Page 38 of 60

Debtor 1

David First Name

Middle Name

Wang Last Name

Case number (if known)\_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|                             |            |  |            | Total claim        |  |
|-----------------------------|------------|--|------------|--------------------|--|
| Total claims                | 6a         | Domestic support obligations   | 6a.        | \$                 |  |
| from Part 1                 | 6b.        | Taxes and certain other debts you owe the government   | 6b.        | \$                 |  |
|                             | 6c.        | Claims for death or personal injury while you were intoxicated   | 6c.        | \$                 |  |
|                             | 6d.        | Other. Add all other priority unsecured claims. Write that amount here.  | 6d.        | + \$0.00           |  |
|                             | 6e.        | <b>Total.</b> Add lines 6a through 6d.   | 6e.        | \$                 |  |
|                             |            |  |            |                    |  |
|                             |            |  |            | Total claim        |  |
| Total claims                | 6f.        | Student loans  | 6f.        | Total claim        |  |
| Total claims<br>from Part 2 | •          | Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims                                       | 6f.<br>6g. |                    |  |
|                             | 6g.<br>6h. | Obligations arising out of a separation agreement or divorce that you did not report as priority   |            | \$ 0.00            |  |
|                             | 6g.<br>6h. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other | 6g.        | \$ 0.00<br>\$ 0.00 |  |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 39 of 60

|   |   |   | Participation of the state of the  | The second secon |  |
|---|---|---|--|--|--|
| Fill In this i                          | nformation to identif   | y your case:  | Applications are not as a second of  |  |  |
| Debtor                                  | David<br>First Name   | Middle Name   | Wang<br>Last Name  |  |  |
| Debtor 2                                | Allie   | Middle Name   | Shivers Wang   |  |  |
| (Spouse If filing                       | ) First Name  | Middle Name   | Last Name  |  |  |
| United States                           | Bankruptcy Court for the  | : Northern District   | of Illinois  |  |  |
| Case number<br>(If known)               |   |   |  |  | Check if this is an amended filing   |
|   |   |   |  |  |  |
| Official                                | Form 106G   |   |  |  |  |
| Sched                                   | ule G: Exe  | cutory C  | ontracts and   | l Unexpired Leases   | 12/15  |
| nformation. additional pa  1. Do you I  | If more space is need<br>ges, write your name<br>nave any executory of<br>theck this box and file               | ded, copy the add<br>and case number<br>contracts or unex<br>this form with the | ittional page, fill it out, nor (if known).  pired leases?  court with your other sche   | ogether, both are equally responsible for su<br>umber the entries, and attach it to this page<br>dules. You have nothing else to report on this for<br>elisted on Schedule A/B: Property (Official For   | On the top of any  |
| 2. List sepa                            | rately each person o<br>, rent, vehicle lease,  | or company with v   | whom you have the cont   | ract or lease. Then state what each contract<br>n in the instruction booklet for more examples of  | or lease is for (for   |
| * | or company with who   |   |  | State what the contract or lease is  | for  |
| 다음 시작되었다.<br>유럽                         |   |   | rasus sideras un casur estrativo   |  |  |
| 1                                       |   |   |  |  |  |
| Name                                    |   |   |  | •  |  |
| Number                                  | Street  |   |  | •  |  |
|   |   |   |  | _  |  |
| City                                    | parquerni egis eg semenye quye e sengsen sem gyarmma in e ni sesses e s sya                                     | State ZIP Code  | www.minityocominity.enilo projektor/minerepieli odklahovypitektornikehereterpiektereter  | (A) = (A) + (A)    | સ્તર ભાગનીએ કહેના માનવ (Andrews Andrews Argente distributed and Andrews Andrews Andrews Andrews Andrews Andrews  |
| .2                                      |   |   |  |  |  |
| Name                                    |   |   | WATER COMMISSION OF THE COMMIS | -  |  |
| Number                                  | Street  |   |  | -  |  |
|   |   |   |  | _  |  |
| City                                    | aanna 1 jaar 17 20 on jordi Armen, oorgin magin veriin moon oo oo oo oo oo oo say ah ah                         | State ZIP Code  | a tradition de State Land State de Land S  | · 大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大   | $e_{1}, e_{2}, e_{3}, e_{4}, e_{5}, $ |
| 3                                       | <u></u>   | ·   |  |  |  |
| Name                                    |   |   |  |  |  |
| Number                                  | Street  | <del> </del>  |  |  |  |
|   |   | Ci-i- Tip O-i-  |  |  |  |
| City                                    | در این در   | State ZIP Code  | k kje vilom i kraljetičkim literatel s o se oričent i setilos kje djelogogij, poplače o se oblosice o kilomby Nombre   |  |  |
| 4                                       | 4-  |   |  |  |  |
| Name                                    |   |   |  |  |  |
| Number                                  | Street  |   |  |  |  |
| City                                    | ·····   | State 7th Cod-  |  |  |  |
| City                                    | المراجعة الم | State ZIP Code  | $\log \log $  | Dida; Sara seri-bana eni -bittimosismok ekong igyesimbakiyi qoqosimbakan libi; palayadan yelgi; asida ili sasimoqosimbili bittimo  | era din Beneria, e in di na beneria e in diriporte di mandra di mandra e i despende e di mandra e di sidandi.  |
| Nome:                                   |   |   |  |  |  |
| Name                                    |   |   |  |  |  |
| Number                                  | Street  |   |  |  |  |
| City                                    |   | State ZIP Code  |  |  |  |
| ∪ity .                                  | •   | J. 217 COUR   |  |  |  |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 40 of 60

| Debtor 1                           | David          |             | Wang        |  |
|------------------------------------|----------------|-------------|-------------|--|
|                                    | First Name     | Middle Name | Last Name   |  |
| Debtor 2                           | <u>Allie</u>   | S           | hivers Wang |  |
| (Spouse, if filin                  | IG) First Name | Middle Name | Last Name   |  |
| (Spouse, if filin<br>United State: | •              |             | Last Name   |  |

Check if this is an amended filing

#### Official Form 106H

#### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| ₩ No                                       | •   | you are filing a joint case, d                           | o not not entre spouse a                                    | s a codet                         | nor.)   |
|--|---|--|---|-----------------------------------|---|
| Yes  |   |  |   |                                   |   |
| Within th<br>Arizona,                      | he last 8 years, have yo<br>California, Idaho, Louisia  | u lived in a community pro<br>ana, Nevada, New Mexico, F | operty state or territory?<br>Puerto Rico, Texas, Wash      | (Commi                            | unity property states and territories include and Wisconsin.)   |
| ☑ No. G                                    | 3o to line 3.   |  |   |                                   | , ,   |
| Yes.                                       | Did your spouse, former   | spouse, or legal equivalent                              | live with you at the time?                                  |                                   |   |
| □ N  | lo  |  |   |                                   |   |
| ☐ Ye                                       | es. In which community s  | state or territory did you live?                         | ?   | Fill in the                       | name and current address of that person.  |
| N  | lame of your spouse, former spou  | use, or legal equivalent                                 | 44.   |                                   |   |
| N  | lumber Street   |  |   |                                   |   |
| ci   | ity   | State  | ZIP Code  |                                   |   |
|  | •   |  |   |                                   | pouse is filing with you. List the person   |
| snown in<br>Schedule<br>Schedule           | i line z again as a codet   | , Schedule E/F (Official Fo                              | a guarantor or cosigner.<br>rm 106E/F), or <i>Schedul</i> e | Make st<br>⊋ G (Offic             | ure you have listed the creditor on cial Form 106G). Use <i>Schedule D</i> ,  |
| Schedule<br>Schedule                       | ine 2 again as a coder D (Official Form 106D) E/F, or Schedule G to 1                           | , Schedule E/F (Official Fo                              | a guarantor or cosigner.<br>rm 106E/F), or <i>Schedul</i> e | Make su<br>G (Office<br>Co        | ure you have listed the creditor on cial Form 106G). Use Schedule D,  |
| Schedule<br>Schedule<br>Column             | ine 2 again as a coder D (Official Form 106D) E/F, or Schedule G to 1                           | , Schedule E/F (Official Fo                              | a guarantor or cosigner.<br>rm 106E/F), or <i>Schedul</i> e | Make su<br>G (Office<br>Cos       | ure you have listed the creditor on cial Form 106G). Use Schedule D, lumn 2: The creditor to whom you owe the delect all schedules that apply:  |
| Schedule<br>Schedule                       | ine 2 again as a coder D (Official Form 106D) E/F, or Schedule G to 1                           | , Schedule E/F (Official Fo                              | a guarantor or cosigner.<br>rm 106E/F), or <i>Schedul</i> e | Make su<br>e G (Offic<br>Co<br>Ch | ure you have listed the creditor on cial Form 106G). Use Schedule D, fumn 2: The creditor to whom you owe the deleck all schedules that apply:  Schedule D, line  |
| Schedule<br>Schedule<br>Column             | ine 2 again as a coder D (Official Form 106D) E/F, or Schedule G to 1                           | , Schedule E/F (Official Fo                              | a guarantor or cosigner.                                    | Make su<br>G (Office<br>Con<br>Ch | ure you have listed the creditor on cial Form 106G). Use Schedule D, furnitumn 2: The creditor to whom you owe the de leck all schedules that apply:  Schedule D, line  |
| Schedule<br>Schedule<br>Column :           | ine 2 again as a codet<br>D (Official Form 106D)<br>E/F, or Schedule G to 1<br>1: Your codebtor | , <i>Schedule E/F</i> (Official Fo<br>fill out Column 2. | rm 106E/F), or Schedule                                     | Make su<br>G (Office<br>Con<br>Ch | ure you have listed the creditor on cial Form 106G). Use Schedule D, furnous 2: The creditor to whom you owe the de leck all schedules that apply:  Schedule D, line  |
| Schedule<br>Schedule<br>Column :           | ine 2 again as a codet<br>D (Official Form 106D)<br>E/F, or Schedule G to 1<br>1: Your codebtor | , Schedule E/F (Official Fo                              | a guarantor or cosigner. rm 106E/F), or Scheduk             | Make su<br>G (Office<br>Con<br>Ch | cial Form 106G). Use Schedule D,  flumn 2: The creditor to whom you owe the deleck all schedules that apply:  Schedule D, line  Schedule E/F, line  |
| Schedule<br>Schedule<br>Column :           | ine 2 again as a codet<br>D (Official Form 106D)<br>E/F, or Schedule G to 1<br>1: Your codebtor | , <i>Schedule E/F</i> (Official Fo<br>fill out Column 2. | rm 106E/F), or Schedule                                     | Con                               | cial Form 106G). Use Schedule D,  flumn 2: The creditor to whom you owe the deleck all schedules that apply:  Schedule D, line  Schedule E/F, line  |
| Name Name                                  | sine 2 again as a codet by D (Official Form 106D) by E/F, or Schedule G to 1 codebtor  Street   | , <i>Schedule E/F</i> (Official Fo<br>fill out Column 2. | rm 106E/F), or Schedule                                     | Make stee G (Office Co)           | ure you have listed the creditor on cial Form 106G). Use Schedule D,  furm 2: The creditor to whom you owe the deleck all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line   |
| Schedule Schedule Column: Name Number City | ine 2 again as a codet<br>D (Official Form 106D)<br>E/F, or Schedule G to 1<br>1: Your codebtor | , <i>Schedule E/F</i> (Official Fo<br>fill out Column 2. | rm 106E/F), or Schedule                                     | Make stee G (Office Co)           | cial Form 106G). Use Schedule D,  flumn 2: The creditor to whom you owe the deleck all schedules that apply:  Schedule D, line Schedule G, line Schedule D, line  |
| Name Name                                  | sine 2 again as a codet by D (Official Form 106D) by E/F, or Schedule G to 1 codebtor  Street   | , <i>Schedule E/F</i> (Official Fo<br>fill out Column 2. | rm 106E/F), or Schedule                                     | Make stee G (Office Co)           | Jumn 2: The creditor to whom you owe the deleck all schedules that apply:  Schedule D, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line   |
| Name Number Number                         | sine 2 again as a codet by D (Official Form 106D) by E/F, or Schedule G to 1 codebtor  Street   | , Schedule E/F (Official Fo<br>fill out Column 2.        | ziP Code  | Con Ch                            | Jumn 2: The creditor to whom you owe the deleck all schedules that apply:  Schedule D, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line Schedule G, line Schedule G, line Schedule G, line  |
| Name Number Number                         | sine 2 again as a codet by D (Official Form 106D) by E/F, or Schedule G to 1 codebtor  Street   | , Schedule E/F (Official Fo<br>fill out Column 2.        | ziP Code  | Con Ch                            | Jump 2: The creditor to whom you owe the deleck all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line |
| Name  Number  City  Name                   | Street  | , Schedule E/F (Official Fo<br>fill out Column 2.        | ziP Code  | Con Ch                            | Jumn 2: The creditor to whom you owe the deleck all schedules that apply:  Schedule D, line Schedule E/F, line   |
| Name Number City  City                     | sine 2 again as a codet by D (Official Form 106D) by E/F, or Schedule G to 1 codebtor  Street   | , Schedule E/F (Official Fo<br>fill out Column 2.        | ziP Code  | Con Ch                            | Jump 2: The creditor to whom you owe the deleck all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line |

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 41 of 60

| Fill in this inform   | ation to identif                      | y your case:   |                     |                       |  |                      |
|---|---------------------------------------|--|---------------------|-----------------------|--|----------------------|
| Debtor 1 Day  |                                       |  | Wang                |                       |  |                      |
| First N Debtor 2 All  |                                       | Middle Name<br>Shivers   | Last Name<br>s Wang |                       |  |                      |
| (Spouse, if filing) First N   |                                       | Middle Name  | Last Name           |                       |  |                      |
| United States Bankru  | uptcy Court for the                   | : Northern District of Illinois  |                     |                       |  |                      |
| Case number<br>(If known)   |                                       |  |                     | 1                     | Check if this is:  |                      |
|   |                                       | the state of the s |                     |                       | An amended filing  |                      |
| Official Form   | 1061                                  |  |                     | •                     | A supplement showing postpetition chap<br>income as of the following date:   | oter 13              |
|   |                                       |  |                     |                       | MM / DD / YYYY   |                      |
|   |                                       | ur Income  |                     |                       | 12<br>and Debtor 2), both are equally responsible fo   | /15                  |
| r you are separated<br>separate sheet to ti                             | a ana your spo                        | use is not filing with you, o<br>e top of any additional pag   | do not include i    | information about     | ing with you, include information about your your spouse. If more space is needed, attach mber (if known). Answer every question.  | spouse.              |
| <ol> <li>Fill in your empi<br/>information.</li> </ol>                  | loyment                               |  | Debtor 1            |                       | Debtor 2 or non-filling spouse   |                      |
| If you have more<br>attach a separate<br>information abou<br>employers. | e page with                           | Employment status  | ☐ Employed          |                       | ☐ Employed ☑ Not employed  |                      |
| Include part-time self-employed wo                                      |                                       |  | •                   |                       |  |                      |
| Occupation may or homemaker, if   |                                       | Occupation   |                     |                       |  |                      |
|   |                                       | Employer's name  |                     |                       |  |                      |
|   |                                       | Employer's address   |                     |                       |  |                      |
|   |                                       |  | Number Street       | t                     | Number Street  | 11774-1774-1744-1744 |
|   |                                       |  |                     |                       |  |                      |
|   |                                       |  | City                | State ZIP Code        | City State ZIP Code  | e                    |
|   |                                       | How long employed there  | 1?                  |                       |  |                      |
|   |                                       |  |                     | _                     | Afficia de la companya de la company |                      |
| Part 2: Give D  | Details About                         | Monthly Income   |                     |                       |  |                      |
| Estimate monthly spouse unless you                                      | y income as of<br>u are separated.    | the date you file this form.   | If you have noth    | ning to report for an | y line, write \$0 in the space. Include your non-fili  | ng                   |
| If you or your non-<br>below. If you need                               | -filing spouse ha<br>I more space, at | ve more than one employer,<br>tach a separate sheet to this  | combine the inform. | ormation for all emp  | oloyers for that person on the lines   |                      |
|   |                                       |  |                     | For Deb               | tor 1 For Debtor 2 or<br>non-filing spouse   |                      |
|   |                                       |  | re all navroll      |                       |  |                      |
| <ol> <li>List monthly gro<br/>deductions). If no</li> </ol>             | oss wages, sala<br>et paid monthly, o | ery, and commissions (befo<br>calculate what the monthly w   | age would be.       | 2. \$                 | <b>\$</b>  | į                    |
| List monthly gradeductions). If no     Estimate and list                | t paid monthly, o                     | calculate what the monthly w   | rage would be.      | 2. \$<br>3. +\$       |  | A Andrews            |

Official Form 106I

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 42 of 60

| Debtor 1               | David<br>First Nam                            |  | Last Name Wang  | 9                                  |                | С                  | ase numbe                   | er (a k       | nown)          |                         |  |              |   |
|------------------------|---|--|---|------------------------------------|----------------|--------------------|-----------------------------|---------------|----------------|-------------------------|--|--------------|---|
|                        |   | - Instance Italian                           | Cast Name   |                                    |                |                    |                             | •             |                |                         |  | <del>^</del> |   |
|                        | Uma de  |  |   |                                    | -              | Fo                 | r Debtor                    | 1             |                | r Debtor<br>n-filing sı |  | See See      | to the seed of all all all all all all all all all al |
| Сору                   | line 4 her                                    | <del>3</del> ,                               |   | →                                  | 4.             | \$_                | ···                         |               |                | \$                      |  |              |   |
| 5. List al             | li payroll d                                  | eductions:                                   |   |                                    |                |                    |                             |               |                |                         |  |              |   |
| 5a. T                  | Гах, Medic                                    | are, and Social Sec                          | Urity deductions  |                                    | <i>e</i> -     |                    |                             |               |                | _                       |  |              |   |
|                        |   | contributions for re                         |   |                                    | 5a.<br>5b.     | Ψ                  |                             | —             | ;              | §                       |  | -            |   |
|                        |   | contributions for ret                        |   |                                    | 5ъ.<br>5с.     |                    |                             |               |                | <u> </u>                |  |              |   |
|                        |   | payments of retire                           |   |                                    | 5d.            |                    |                             |               |                |                         |  |              |   |
|                        | nsurance                                      | •  |   |                                    | 5u.<br>5e.     |                    |                             |               | *              |                         |  |              |   |
| 5f. <b>D</b>           | omestic s                                     | upport obligations                           |   |                                    | 56.<br>5f.     | هـ<br>مــــ        |                             |               | \$             |                         |  |              |   |
|                        | nion dues                                     | _  |   |                                    |                | φ                  |                             | _             | \$             |                         |  |              |   |
| =                      |   |  |   | ;                                  | 5g.            | \$                 |                             |               | \$             |                         |  |              |   |
|                        |   |  |   |                                    | 5h.            | + \$               |                             |               | + \$           |                         | ······································ |              |   |
|                        |   |  | es 5a + 5b + 5c + 5d + 5e +5  |                                    | 6.             | \$                 |                             |               | \$             |                         |  |              |   |
| 7. Calcu               | ilate total r                                 | nonthly take-home                            | pay. Subtract line 6 from line  | <del>2</del> 4.                    | 7.             | \$                 |                             | _             | \$             |                         |  |              |   |
| 8. List all            | other inc                                     | ome regularly recei                          | ved:  |                                    |                |                    |                             |               |                |                         |  |              |   |
| pre                    | oression,                                     | or tarm                                      | y and from operating a bus  |                                    |                |                    |                             |               |                |                         |  |              |   |
| 160                    | tach a state<br>ceipts, ordi<br>onthly net ii | nary and necessary i                         | erty and business showing grousiness expenses, and the  | total                              |                | \$                 |                             |               | \$             |                         |  |              |   |
|                        | erest and                                     |  |   | 8                                  | a.<br>L        | •                  |                             |               | Ψ              |                         |  |              |   |
|                        |   |  | ou, a non-filing spouse, or   |                                    | Ų.             | \$                 | ···                         | _             | \$_            |                         |  |              |   |
| ıeg                    | gulariy rec                                   | eive   |   |                                    |                |                    |                             |               |                |                         |  |              |   |
| set                    | ttiement, ar                                  | id property settlemer                        | child support, maintenance, ant.  | divorce<br>80                      | <b>.</b>       | \$                 |                             | _             | \$             |                         |  |              |   |
|                        |   | ent compensation                             |   | 80                                 | i.             | \$                 |                             | _             | \$             |                         |  |              |   |
|                        | cial Securi                                   |  |   | 86                                 | €.             | \$ <u>1</u>        | .604.00                     | )_            | \$_            | 698                     | .00                                    |              |   |
| Incl<br>that<br>Nut    | lude cash a<br>t you receiv                   | issistance and the va                        | at you regularly receive<br>alue (if known) of any non-ca:<br>nps (benefits under the Supp<br>ousing subsidies. | sh assistance<br>elemental         |                |                    |                             |               |                |                         |  |              |   |
|                        |   |  | - 10 to   | 8f.                                |                | \$                 |                             | -             | \$             |                         | <del></del>                            |              |   |
| 8g. Pen                | ision or re                                   | tirement income                              |   | 8g                                 |                | \$1                | ,739.00                     |               | \$             |                         |  |              |   |
| 8h. <b>Oth</b>         | er monthly                                    | y income. Specify: _                         |   | 8h                                 | . +            | - \$               |                             | -             | + \$           |                         | *******                                |              |   |
| . Add all              | other inco                                    | me. Add lines 8a + 8                         | 3b + 8c + 8d + 8e + 8f +8g +  |                                    | Γ              | \$ 3               | ,343.00                     | j             | - \$_<br>  \$_ | 698.                    | 00                                     |              |   |
| . Calculate            | e monthly                                     | income. Add line 7                           | + line 9.   |                                    | Γ              |                    | 242.22                      | Ī             |                |                         |  | _            |   |
| Add the e              | entries in lii                                | ne 10 for Debtor 1 ar                        | nd Debtor 2 or non-filing spou  | ıse. 10                            |                | \$ 3,              | 343.00                      | +             | \$             | 698.                    | <u>00</u>  =                           | =  \$_       | 4,041.0   |
| . State ali            | other regu                                    | ular contributions to<br>s from an unmarried | the expenses that you list partner, members of your ho  | t in Schedule .                    | J.             | ondonte            |                             | J             |                |                         |  | L            |   |
| 11101100 01            | TOIGHTOS.                                     |  |   |                                    |                |                    |                             |               |                |                         |  |              |   |
| Do not ind<br>Specify: | ciude any a                                   | amounts already inclu                        | uded in lines 2-10 or amounts   | s that are not a                   | vail           | able to            | pay expe                    | nses          | listed i       | n <i>Schedu</i>         | _                                      |              | 0.0   |
|                        |   |  |   |                                    |                |                    |                             |               |                |                         | 11. 🛨                                  | ¥            | 0.00  |
| Write that             | amount or                                     | the Summary of Yo                            | line 10 to the amount in line<br>our Assets and Liabilities and   | e 11. The resul<br>Certain Statist | t is i<br>ical | the con<br>Informa | nbined mo<br>ation, if it a | onthi<br>appl | y incom<br>ies | e.                      | 12.                                    | \$           | 4,041.00  |
| . Do you e             | expect an i                                   | ncrease or decreas                           | e within the year after you   | file this form?                    | ,              |                    |                             |               |                |                         |  |              | nbined<br>nthly income                                |
| ₩ No.                  | -   | *******                                      |   |                                    |                | <del></del>        | ···                         |               |                |                         |  |              |   |
| Yes. I                 | ⊨xplain:                                      |  |   |                                    |                |                    |                             |               |                |                         |  |              |   |

David

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 43 of 60

|    | Fill in this i                 | nformation to identify                                      | / your case:   | er and a series of the                              |               |   |   |
|----|--------------------------------|---|--|---|---------------|---|---|
| ľ  | Debtor 1                       | David   | Wang   |   |               |   |   |
|    |                                | First Name  | Middle Name Last Name  | Check if t  | this is:      |   |   |
|    | Debtor 2<br>(Spouse, if filing | Allie<br>First Name   | Shivers Wang Middle Name Last Name   | An an   |               | -   |   |
|    | United States                  | Bankruptcy Court for the:                                   | Northern District of Illinois  |   |               | t showing post<br>of the following                          | petition chapter 13<br>g date:  |
|    | Case number<br>(If known)      | **************************************                      |  | MM / I  | OD / YYY      | Ÿ   |   |
| (  | Official I                     | Form 106J   |  |   |               |   |   |
| 5  | Sched                          | lule J: Yo  | ur Expenses  |   |               |   | 12/15   |
| in | formation.                     |   | ossible. If two married people are fill ed, attach another sheet to this form  |   |               |   | <del>-</del>  |
| P  | art 1:                         | Describe Your Hou   | usehold  |   |               |   |   |
| 1. | ls this a joi                  | nt case?  |  |   |               |   |   |
|    | No. Go                         | to line 2.<br>es Debtor 2 live in a s                       | separate household?  |   |               |   |   |
|    |                                | No<br>Yes. Debtor 2 must fil                                | e Official Form 106J-2, <i>Expenses for</i> S                                  | eparate Household of Debtor 2.                      |               |   |   |
| 2. | Do you hav                     | e dependents?   | ☑ No   |   |               | arinn a an ann ann an air a tha ann an ann ann ann an an an |   |
|    | Do not list E<br>Debtor 2.     | ebtor 1 and   | Yes. Fill out this information for each dependent                              | Dependent's relationship to<br>Debtor 1 or Debtor 2 | arkenio       | Dependent's age   | Does dependent live with you?   |
|    | Do not state names.            | the dependents'   |  |   | _             |   | No Yes  |
|    |                                |   |  |   | <del></del> . |   | ☐ No<br>☐ Yes   |
|    |                                |   |  |   |               |   | □ No  |
|    |                                |   |  | <u> </u>  | -             | <del></del>   | ☐ Yes   |
|    |                                |   |  |   |               |   | ☐ No<br>☐ Yes   |
|    |                                |   |  |   |               |   | ☐ No  |
|    |                                |   |  | <u></u>   |               |   | ☐ Yes   |
|    | expenses of                    | penses include<br>f people other than<br>d your dependents? | ☑ No<br>☐ Yes  |   |               |   |   |
| Pa | rt 2: Es                       | timate Your Ongoi   | ng Monthly Expenses  |   | 1001          |   |   |
| ex | timate your                    | expenses as of your<br>of a date after the ban              | bankruptcy filing date unless you a<br>kruptcy is filed. If this is a suppleme |   |               |   |   |
| -  | =                              |   | -cash government assistance if you   | know the value of                                   |               | gedisealth a  |   |
| su | ch assistan                    | ce and have included  | it on Schedule I: Your Income (Office  | cial Form 106l.)                                    |               | Your exper  | ISOS<br>unidencolinidadolinina of colonicio controlina numerini control |
| 4. |                                | or home ownership e<br>the ground or lot.                   | xpenses for your residence. Include  | first mortgage payments and                         | 4.            | \$  | 700.00  |
|    |                                | ided in line 4:   |  |   |               | •   |   |
|    |                                | estate taxes  | under de la company -  |   | 4a.           |   |   |
|    | •                              | rty, homeowner's, or re                                     |  |   | 4b.           |   |   |
|    |                                | maintenance, repair, a                                      |  |   | 4c.           | Φ   | namytrad - nar  |
|    | 4d. Home                       | owner's association or                                      | CONCOMENUM QUES  |   | 4d.           | Φ   | <del></del>   |

#### Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 44 of 60

Debtor 1 David Wang Case number (# known)\_\_\_\_\_

|     |  |      | Your expenses |
|-----|--|------|---------------|
| 5   | Additional mortgage payments for your residence, such as home equity loans   | 5.   | S             |
| 6.  | Utilities:   |      |               |
|     | 6a. Electricity, heat, natural gas   | 6a.  | \$75.00 °     |
|     | 6b. Water, sewer, garbage collection   | 6b.  | \$            |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c.  | \$            |
|     | 6d. Other. Specify:  | 6d.  | \$            |
| 7.  | Food and housekeeping supplies   | 7.   | \$ 250.00     |
| 8.  | Childcare and children's education costs   | 8.   | \$            |
| 9.  | Clothing, laundry, and dry cleaning  | 9,   | \$ 75.00.     |
| 10. | Personal care products and services  | 10.  | \$200.00      |
| 11. | Medical and dental expenses  | 11.  | \$            |
| 12. | Transportation. Include gas, maintenance, bus or train fare.   |      | \$ 200.00     |
|     | Do not include car payments.   | 12.  | \$200.00      |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books   | 13.  | \$            |
| 14. | Charitable contributions and religious donations   | 14.  | \$            |
| 15. | Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  |      |               |
|     | 15a. Life insurance  | 15a. | \$243.00      |
|     | 15b. Health insurance  | 15b. | \$            |
|     | 15c. Vehicle insurance   | 15c. | \$511.00°     |
|     | 15d. Other insurance. Specify:   | 15d. | \$            |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:   | 16.  | \$            |
| 17. | Installment or lease payments:   |      |               |
|     | 17a. Car payments for Vehicle 1  | 17a. | \$546.00      |
|     | 17b. Car payments for Vehicle 2  | 17b. | \$609.00^     |
|     | 17c. Other. Specify: Car Payments for Vehicle 3  | 17c. | \$379.00      |
|     | 17d. Other. Specify:   | 17ď. | \$            |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18.  | \$            |
| 19. | Other payments you make to support others who do not live with you.  |      |               |
|     | Specify:   | 19.  | \$            |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income   | 9.   |               |
|     | 20a. Mortgages on other property   | 20a. | \$            |
|     | 20b. Real estate taxes   | 20b. | \$            |
|     | 20c. Property, homeowner's, or renter's insurance  | 20c. | \$            |
|     | 20d. Maintenance, repair, and upkeep expenses  | 20d. | \$            |
|     | 20e. Homeowner's association or condominium dues   | 20e. | \$            |

## Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 45 of 60

| Debtor 1             | David Wang First Name Middle Name Last Name  | Case number (if known) |   |          |
|----------------------|--|------------------------|---|----------|
| 21. <b>Other</b> . S | pecify: Prescription Medications   | 21.                    | +\$                                     | 28.00    |
| 2. Calculat          | e your monthly expenses.   |                        | *************************************** |          |
| 22a. Add             | lines 4 through 21.  | 22a.                   | \$                                      | 4,023.00 |
| 22b. Cop             | y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   | 22b.                   | \$                                      | 0.00     |
| 22c. Add             | line 22a and 22b. The result is your monthly expenses.   | <b>22</b> c.           | \$                                      | 4,023.00 |
| 3. Calculate         | your monthly net income.   |                        |   |          |
| 23a. Cop             | y line 12 (your combined monthly income) from Schedule I.  | 23a.                   | \$                                      | 4,041.00 |
| 23b. Cop             | y your monthly expenses from line 22c above.   | 23b.                   | -\$                                     | 4,023.00 |
|                      | tract your monthly expenses from your monthly income. result is your monthly net income.   | <b>23c</b> .           | \$                                      | 18.00    |
|                      | spect an increase or decrease in your expenses within the year after you fi<br>sle, do you expect to finish paying for your car loan within the year or do you exp |                        |   |          |
| mortgage             | payment to increase or decrease because of a modification to the terms of your   | mortgage?              |   |          |
| ☑ No.<br>☐ Yes.      | Explain here:  |                        |   |          |
|                      |  |                        |   |          |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 46 of 60

| in this information to identify your case  | to a consider to explanate the control of the contr |  |                      |
|--|--|--|----------------------|
| otor 1 David First Name Middle Na  | Wang  Last Name  | _  |                      |
| tor 2 Allie  | Shivers Wang   | -  |                      |
| use, if filing) First Name Middle Na   | ame Last Name  |  |                      |
| ed States Bankruptcy Court for the: Northern [   | District of Illinois   |  |                      |
| e number<br>nown)  |  |  |                      |
| ,  |  |  | Check if this is     |
|  |  | annua Annua d  | amended filing       |
|  |  |  |                      |
| Official Form 106Dec   |  |  |                      |
| eclaration About   | an Individual D  | ebtor's Schedules  | 12/1                 |
|  |  |  |                      |
| two married people are filing together, I  | both are equally responsible for su  | plying correct information.  |                      |
|  | connection with a bankruptcy case  | schedules. Making a false statement, conc<br>can result in fines up to \$250,000, or impris                                      |                      |
|  | connection with a bankruptcy case  |  |                      |
| Sign Below  Did you pay or agree to pay someone  | connection with a bankruptcy case<br>19, and 3571.   | can result in fines up to \$250,000, or impris   |                      |
| Sign Below  Did you pay or agree to pay someone  | connection with a bankruptcy case<br>19, and 3571.   | can result in fines up to \$250,000, or impris   | onment for up to 20  |
| Sign Below  Did you pay or agree to pay someone  | connection with a bankruptcy case<br>19, and 3571.   | can result in fines up to \$250,000, or imprise fill out bankruptcy forms?  . Attach Bankruptcy Petition Preparer's Notice, Deci | onment for up to 20  |
| Sign Below  Did you pay or agree to pay someone  | connection with a bankruptcy case<br>19, and 3571.   | can result in fines up to \$250,000, or impris   | conment for up to 20 |
| Sign Below  Did you pay or agree to pay someone  | connection with a bankruptcy case<br>19, and 3571.   | can result in fines up to \$250,000, or imprise fill out bankruptcy forms?  . Attach Bankruptcy Petition Preparer's Notice, Deci | conment for up to 20 |
| Sign Below  Did you pay or agree to pay someone  | connection with a bankruptcy case<br>19, and 3571.   | can result in fines up to \$250,000, or imprise fill out bankruptcy forms?  . Attach Bankruptcy Petition Preparer's Notice, Deci | onment for up to 20  |
| Sign Below  Did you pay or agree to pay someone  | connection with a bankruptcy case<br>19, and 3571.   | can result in fines up to \$250,000, or imprise fill out bankruptcy forms?  . Attach Bankruptcy Petition Preparer's Notice, Deci | onment for up to 20  |
| Sign Below  Did you pay or agree to pay someone  No  Yes. Name of person  Under penalty of perjury, I declare that | connection with a bankruptcy case 19, and 3571.  who is NOT an attorney to help you  | fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Decl. Signature (Official Form 119).                   | onment for up to 20  |
| Sign Below  Did you pay or agree to pay someone  No  Yes. Name of person   | connection with a bankruptcy case 19, and 3571.  who is NOT an attorney to help you  | fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Decl. Signature (Official Form 119).                   | conment for up to 20 |
| Sign Below  Did you pay or agree to pay someone  No  Yes. Name of person  Under penalty of perjury, I declare that | connection with a bankruptcy case 19, and 3571.  who is NOT an attorney to help you  | fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Decl. Signature (Official Form 119).                   | conment for up to 20 |
| Sign Below  Did you pay or agree to pay someone  No  Yes. Name of person  Under penalty of perjury, I declare that | connection with a bankruptcy case 19, and 3571.  who is NOT an attorney to help you  | fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Decl. Signature (Official Form 119).                   | laration, and        |

Date 4-13-2017

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 47 of 60

| e number                                  |   |               |                     |   |   |          | Check if this is a                      |
|---|---|---------------|---------------------|---|---|----------|---|
| nown)                                     |   |               |                     |   |   | 6        | amended filing                          |
| icial                                     | Form                                    | า 107         |                     |   |   |          |   |
| aten                                      | ent                                     | of Fin        | ancial Aff          | fairs for Ind   | ividuals Filing for Bar   | nkruptcy | 04                                      |
| What is                                   |   |               |                     |   |   |          |   |
| Marr<br>Not of<br>During to<br>Mo<br>Yes. | married  he last:                       | of the places |                     |   | ude where you live now.   |          | Dates Debtor                            |
| Marr<br>Not of<br>During to<br>Mo<br>Yes. | married                                 | of the places |                     |   | ude where you live now.   |          | Dates Debtor 2 lived there              |
| Marr<br>Not of<br>During to<br>Mo<br>Yes. | married  he last:                       | of the places |                     | st 3 years. Do not incl<br>Dates Debtor<br>lived there                      | ude where you live now.  1 Debtor 2:  |          | lived there                             |
| Marring t  During t  Y  No  De            | married  he last:                       | of the places |                     | st 3 years. Do not incl   | ude where you live now.  1 Debtor 2:  |          | Same as Debt                            |
| Marring to No.                            | married  the last  List all (           | of the places |                     | st 3 years. Do not incl  Dates Debtor lived there  From To                  | ude where you live now.  1 Debtor 2:  Same as Debtor 1  Number Street               | ZIP Code | lived there  Same as Debi               |
| Marring to No.                            | married  the last all controls  btor 1: | of the places | you lived in the la | st 3 years. Do not incl  Dates Debtor lived there  From To                  | Debtor 2:  Same as Debtor 1  Number Street  | ZIP Code | lived there  Same as Debt  From         |
| Marring to No.  During to No.  De No.     | married the last: List all ( btor 1:    | of the places | you lived in the la | st 3 years. Do not incl  Dates Debtor lived there  From To                  | ude where you live now.  1 Debtor 2:  Same as Debtor 1  Number Street  City State 2 | ZIP Code | Same as Debt From To  Same as Debt From |
| Marring to No.  During to No.  De No.     | married  the last all controls  btor 1: | of the places | you lived in the la | st 3 years. Do not incl  Dates Debtor lived there  From To                  | ude where you live now.  1 Debtor 2:  Same as Debtor 1  Number Street  City State 2 | ZIP Code | Same as Debt From To  Same as Debt      |
| Marring to No.                            | married the last: List all ( btor 1:    | of the places | you lived in the la | st 3 years. Do not incl  Dates Debtor lived there  From To  From To  To  To | ude where you live now.  1 Debtor 2:  Same as Debtor 1  Number Street  City State 2 | ZIP Code | Same as Debt From To Same as Debt From  |

Part 2: Explain the Sources of Your Income

## Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 48 of 60

| btor 1                               | David  | Wang   | Case nu  | ımber (if known)   |  |
|--------------------------------------|--|--|--|--|--|
|                                      | First Name Middle Name La  | st Name  |  |  |  |
| Fill ir                              | you have any income from employmenthe total amount of income you receivulate income you have incomented to the second second to the second sec | ed from all jobs and all bus   | inesses, including part-ti   | me activities.   | dar years?   |
|                                      | No<br>Yes, Fill in the details.  |  |  |  |  |
|                                      |  | Debtor 1   |  | Debtor 2   |  |
|                                      |  | Sources of income<br>Check all that apply.   | Gross Income<br>(before deductions and<br>exclusions)  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)  |
|                                      | From January 1 of current year until the date you filed for bankruptcy:  | Wages, commissions bonuses, tips   | \$   | Wages, commissions, bonuses, tips  | \$   |
|                                      | aga kanan kanan kanan makan kanan kana<br>Kanan kanan ka   | Operating a business   | er og skriverer er er græd er med er ætte med træde for  | Operating a business   | grand and the state of the stat |
|                                      | For last calendar year:  | Wages, commissions bonuses, tips   | \$   | Wages, commissions, bonuses, tips  | \$   |
|                                      | (January 1 to December 31, 2016<br>YYYY  | Operating a business   |  | Operating a business   |  |
|                                      | For the calendar year before that:   | Wages, commissions bonuses, tips   |  | Wages, commissions, bonuses, tips  | s  |
|                                      | (January 1 to December 31, 2015  | Operating a business   | \$   | Operating a business   | <b>a</b>   |
| Did y<br>Inclu<br>unen<br>gamb       | you receive any other income during<br>ide income regardless of whether that in<br>inployment, and other public benefit pay<br>bling and lottery winnings. If you are filing   | ncome is taxable. Example<br>ments; pensions; rental ind<br>ng a joint case and you hav  | s of other income are alir<br>come; interest; dividends;<br>re income that you receiv  | ; money collected from lawsured together, list it only once  | its; royalties; and  |
| Did y<br>Inclu-<br>unen<br>gamb      | you receive any other income during ade income regardless of whether that in apployment, and other public benefit pay bling and lottery winnings. If you are filling ach source and the gross income from  | ncome is taxable. Example<br>ments; pensions; rental ind<br>ng a joint case and you hav  | s of other income are alir<br>come; interest; dividends;<br>re income that you receiv  | ; money collected from lawsured together, list it only once  | its; royalties; and  |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ade income regardless of whether that in apployment, and other public benefit pay bling and lottery winnings. If you are filling ach source and the gross income from  | ncome is taxable. Example<br>ments; pensions; rental ind<br>ng a joint case and you hav  | s of other income are alir<br>come; interest; dividends;<br>re income that you receiv  | ; money collected from lawsured together, list it only once  | its; royalties; and  |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ade income regardless of whether that in apployment, and other public benefit pay bling and lottery winnings. If you are filing each source and the gross income from  | ncome is taxable. Example<br>ments; pensions; rental ind<br>ng a joint case and you hav  | s of other income are alir<br>come; interest; dividends;<br>re income that you receiv  | ; money collected from lawsured together, list it only once  | its; royalties; and  |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ade income regardless of whether that in apployment, and other public benefit pay bling and lottery winnings. If you are filing each source and the gross income from  | ncome is taxable. Example ments; pensions; rental income a joint case and you have each source separately.   | s of other income are alir<br>come; interest; dividends;<br>re income that you receiv  | ; money collected from lawsu<br>yed together, list it only once<br>at you listed in line 4.  | Gross Income from each source (before deductions and   |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ide income regardless of whether that in imployment, and other public benefit pay bling and lottery winnings. If you are filling each source and the gross income from No Yes. Fill in the details.  | person is taxable. Example ments; pensions; rental income a joint case and you have each source separately. Debtor 1  Sources of income Describe below.                | Gross Income from each source (before deductions and exclusions)  \$ 5,217.00  | ; money collected from lawsured together, list it only once at you listed in line 4.  Debtor 2  Sources of income Describe below.      | Gross income from each source (before deductions and exclusions)   |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ade income regardless of whether that in apployment, and other public benefit pay bling and lottery winnings. If you are filing each source and the gross income from  | person is taxable. Example ments; pensions; rental income a joint case and you have each source separately. Debtor 1  Sources of income Describe below.                | s of other income are alir<br>come; interest; dividends;<br>re income that you receiv<br>to not include income that<br>Gross income from<br>each source<br>(before deductions and<br>exclusions) | ; money collected from lawsured together, list it only once at you listed in line 4.  Debtor 2  Sources of income Describe below.      | Gross income from each source (before deductions and exclusions)   |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ide income regardless of whether that in imployment, and other public benefit pay bling and lottery winnings. If you are filling each source and the gross income from No Yes. Fill in the details.  | ncome is taxable. Example ments; pensions; rental income a joint case and you have each source separately. Debtor 1  Sources of income Describe below.  Pension        | Gross Income from each source (before deductions and exclusions)  \$ 5,217.00  | ; money collected from lawsured together, list it only once at you listed in line 4.  Debtor 2  Sources of income Describe below.      | Gross income from each source (before deductions and exclusions)   |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ide income regardless of whether that in imployment, and other public benefit pay bling and lottery winnings. If you are filling each source and the gross income from No Yes. Fill in the details.  | pencome is taxable. Example ments; pensions; rental income a joint case and you have each source separately. Debtor 1  Sources of income Describe below.  Pension  SSI | Gross Income from each source (before deductions and exclusions)  \$ 5,217.00 \$ 4,812.00 \$   | ; money collected from lawsured together, list it only once at you listed in line 4.  Debtor 2  Sources of Income Describe below,  SSI | Gross Income from each source (before deductions and exclusions)  \$   |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ide income regardless of whether that in imployment, and other public benefit pay bling and lottery winnings. If you are filling each source and the gross income from No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:   | pension  Pension  Pension  Pension   | Gross income from each source (before deductions)  \$\frac{5}{2}\frac{17.00}{4.812.00}\$  \$\frac{20,868.00}{2}  | ; money collected from lawsured together, list it only once at you listed in line 4.  Debtor 2  Sources of income Describe below.      | Gross Income from each source (before deductions and exclusions)  \$   |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ide income regardless of whether that in imployment, and other public benefit pay bling and lottery winnings. If you are filineach source and the gross income from No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  | pencome is taxable. Example ments; pensions; rental income a joint case and you have each source separately. Debtor 1  Sources of income Describe below.  Pension  SSI | Gross Income from each source (before deductions and exclusions)  \$ 5,217.00 \$ 4,812.00 \$   | ; money collected from lawsured together, list it only once at you listed in line 4.  Debtor 2  Sources of income Describe below.  SSI | Gross Income from each source (before deductions and exclusions)  \$   |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ide income regardless of whether that in imployment, and other public benefit pay bling and lottery winnings. If you are filling each source and the gross income from No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31,2016  | pension  Pension  Pension  Pension   | Gross income from each source (before deductions)  \$\frac{5}{2}\frac{17.00}{4.812.00}\$  \$\frac{20,868.00}{2}  | ; money collected from lawsured together, list it only once at you listed in line 4.  Debtor 2  Sources of income Describe below.  SSI | Gross income from each source (before deductions and exclusions)  \$ 2,094.00 \$ \$ \$ \$ \$ 8,376.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$  |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ide income regardless of whether that in imployment, and other public benefit pay bling and lottery winnings. If you are filling each source and the gross income from No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31,2016  | pension  Pension  Pension  Pension   | Gross income from each source (before deductions)  \$\frac{5}{2}\frac{17.00}{4.812.00}\$  \$\frac{20,868.00}{2}  | ; money collected from lawsured together, list it only once at you listed in line 4.  Debtor 2  Sources of income Describe below.  SSI | Gross income from each source (before deductions and exclusions)  \$ 2,094.00 \$ \$ 8,376.00 \$ \$ 8,376.00  |
| Did y<br>Incluuren<br>gamb<br>List e | you receive any other income during ide income regardless of whether that in imployment, and other public benefit pay bling and lottery winnings. If you are filling each source and the gross income from No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31, 2016   | pension  Pension  SSI  Pension  SSI  | Gross income from each source (before deductions and exclusions)  \$ 5,217.00 \$ 4,812.00 \$ 19,248.00 \$ 19,248.00 \$   | ; money collected from lawsured together, list it only once at you listed in line 4.  Debtor 2  Sources of Income Describe below.  SSI | Gross Income from each source (before deductions and exclusions)  \$   |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 49 of 60

| Debtor 1     | David  |   | Wang          |                                   | Case number (if known)   |  |
|--------------|--|---|---------------|-----------------------------------|--|--|
|              | First Name Middle Name   | Last Name                                 |               |                                   |  |  |
|              | 1  |   |               |                                   |  |  |
| Part 3:      | List Certain Payments \  | ou Made Befor                             | re You Fil    | ed for Bankrı                     | ıptcy  |  |
|              |  |   |               |                                   |  |  |
| 6. Are eit   | ther Debtor 1's or Debtor 2's                                  | debts primarily c                         | onsumer d     | ebts?                             |  |  |
| ☐ No         | . Neither Debtor 1 nor Debto<br>"incurred by an individual pri | or 2 has primarily<br>marily for a persor | consumer      | debts. Consum<br>or household pur | ner debts are defined in 11 U.S<br>rpose."   | .C. § 101(8) as  |
|              | During the 90 days before yo                                   | ou filed for bankrup                      | otcy, did you | ı pay any credite                 | or a total of \$6,425* or more?  |  |
|              | No. Go to line 7.  |   |               |                                   |  |  |
|              | total amount you pa  | id that creditor. Do                      | o not include | e payments for o                  | ore in one or more payments a<br>domestic support obligations, s<br>ttorney for this bankruptcy case | uch as   |
|              |  | •   | •             | -                                 | iled on or after the date of adju  |  |
| <b>⊠</b> Ye: | s. Debtor 1 or Debtor 2 or bot                                 | h have primarily                          | consumer      | debts.                            |  |  |
|              | During the 90 days before yo                                   |   |               |                                   | or a total of \$600 or more?   |  |
|              | No. Go to line 7.  |   |               |                                   |  |  |
|              |  | ### # # <b></b>                           |               | -60000                            |  | 111  |
|              | creditor. Do not incli   | ude payments for                          | domestic su   | pport obligation                  | and the total amount you paid<br>s, such as child support and  | tnat   |
|              | alimony. Also, do no   | t include payment                         | ts to an atto | rney for this ban                 | kruptcy case.  |  |
|              |  |   | Dates of      | Total amou                        | nt paid Amount you still   | owe Was this payment for   |
|              |  |   | payment       |                                   |  |  |
|              |  |   |               | \$                                | \$   |  |
|              | Creditor's Name  |   |               |                                   |  | Car  |
|              | Number Street  |   |               | _                                 |  | Credit card  |
|              | Marino: Order  |   |               |                                   |  | Loan repayment   |
|              |  |   |               | <del></del>                       |  | Suppliers or vendors   |
|              | City State   | ZIP Code                                  |               |                                   |  | Other  |
|              | and the second of the second                                   |   |               |                                   | and the straightful content for a formal and a factor of the first of the formal and a factor.       | and for his force, who are produced as a manifestation of the control of the cont |
|              |  |   |               | \$                                | \$   |  |
|              | Creditor's Name  |   | -             | _                                 |  | Car  |
|              | New Proof  |   |               | -                                 |  | Credit card  |
|              | Number Street  |   |               |                                   |  | Loan repayment   |
|              |  |   |               | _                                 |  | ☐ Suppliers or vendors   |
|              | City State   | ZIP Code                                  |               |                                   |  | Other  |
|              | Ony Ones   | 2 0020                                    |               |                                   |  |  |
|              | and provide an artist of the contraction of                    | er two tracks and a contract              | ****          |                                   |  |  |
|              | Creditor's Name  |   |               | _ \$                              | <u> </u>   | Mortgage   |
|              |  |   |               |                                   |  | Car  |
|              | Number Street  | ***************************************   |               | _                                 |  | Credit card  |
|              |  |   | -             | _                                 |  | Loan repayment   |
|              |  |   |               |                                   |  | Suppliers or vendors   |
|              | City State   | ZIP Code                                  |               |                                   |  | Other  |
|              |  |   |               |                                   |  |  |

## Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 50 of 60

| tor 1                  | David  |  | Wang                                  |                                     | Case number (if known                      | )   |
|------------------------|--|--|---------------------------------------|-------------------------------------|--|---|
|                        | First Name Middle Name   | Last Name  |                                       |                                     |  |   |
| Inside corporagen such | orations of which you are an<br>t, including one for a busines<br>as child support and alimony | y general partners;<br>officer, director, pers<br>s you operate as a :<br>/. | relatives of any goon in control, or  | eneral partners; powner of 20% or i | artnerships of whi<br>more of their voting | who was an Insider?  ch you are a general partner; g securities; and any managing or domestic support obligations,  |
| ¥ ¥                    | es. List all payments to an in   | sider.   | Dates of payment                      | Total amount paid                   |  | Reason for this payment   |
|                        | Insider's Name   |  | -                                     | \$                                  | \$   |   |
|                        | Number Street  |  | ·                                     |                                     |  |   |
|                        | City   | State ZIP Code   | · <u></u>                             |                                     |  | Name of the state |
|                        | Insider's Name   |  |                                       | \$                                  | \$   |   |
|                        | Number Street  | <u></u>  |                                       |                                     |  |   |
|                        | City   |  | <del></del>                           |                                     |  |   |
| n in:<br>ncluc         | sider?<br>de payments on debts guarar  | nteed or cosigned by   |                                       | ments or transf                     | er any property o                          | n account of a debt that benefited  |
|                        |  |  | Dates of payment                      | Total amount paid                   | Amount you still owe                       | Reason for this payment include creditor's name   |
| Ĩ                      | nsider's Name  |  |                                       | \$                                  | \$   |   |
| ĩ                      | Number Street  |  |                                       |                                     |  |   |
| 7                      | City   | State ZIP Code   |                                       |                                     |  |   |
| _                      | nsider's Name  |  | · · · · · · · · · · · · · · · · · · · | \$                                  | \$   |   |
| _                      | Number Street  |  |                                       |                                     |  |   |
| -                      |  |  |                                       |                                     |  |   |
| -                      | N.S.   | Ptota ZID Codo   |                                       |                                     | OLO CALLES                                 |   |

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 51 of 60

| r 1           | David  |                    | V               | Vang  | Case num  | nber (if known)  |  |
|---------------|--|--------------------|-----------------|---|---|--|--|
| , ,           | First Name Middle No   | ame Last Nam       |                 |   | Quoe sium   | iber (ir known)  |  |
|               |  |                    |                 |   |   |  |  |
|               | 1  |                    |                 |   |   |  |  |
| rt 4:         | Identify Legal Ac  | tions, Reposses    | ssions, ar      | nd Foreclosur   | 'es   |  |  |
| Vithin        | 1 year before you fil  | ed for bankruptcy  | , were you      | a party in any  | lawsuit, court action,  | , or administrative proc   | eeding?  |
|               |  |                    |                 |   |   |  | port or custody modificati   |
|               | ontract disputes.  | • •                |                 |   |   |  | ·  |
| No No         |  |                    |                 |   |   |  |  |
| _             |  |                    |                 |   |   |  |  |
| i Ye:         | s. Fill in the details.  |                    | gravely said:   | a survey years  | ne di tara iki wadi bele wese.  | Para Jaran da James Parka da Baran Bar | Ethelija – Artha Galley aydekka                                    |
|               |  | 1                  | Nature of the   | e case  | Court or agen   | ncy  | Status of the case   |
|               |  | 5                  |                 |   | ***************************************   |  |  |
| C             | ase title  | İ                  |                 |   |   | ***  | Pending  |
| •             | 200 1100   |                    |                 |   | Court Name  |  | On appeal  |
|               |  |                    |                 |   |   |  |  |
|               |  |                    |                 |   | Number Street   | ***************************************  | Concluded  |
| Ca            | ase number   |                    |                 |   |   |  |  |
| -             |  |                    |                 |   | City  | State ZIP Code   |  |
|               |  |                    |                 | or records to see an institution of   | water the same of |  |  |
|               |  |                    |                 |   |   |  |  |
| Ca            | ase title  |                    |                 |   | Court Name  |  | Pending  |
|               |  | 1                  |                 |   |   |  | On appeal  |
| _             |  | •                  |                 |   | Number Street   |  | Concluded  |
|               |  |                    |                 |   | Traines. Queen  |  |  |
| Ca            | ase number   |                    |                 |   |   |  | Madella Martine Martine  |
|               |  |                    |                 |   |   |  |  |
| heck :        | 1 year before you file all that apply and fill in . Go to line 11. s. Fill in the information                              | the details below. | was any o       | f your property   | city repossessed, forecl  | State ZIP Code   | ned, seized, or levied?  |
| heck :        | all that apply and fill in . Go to line 11.  | the details below. |                 | f your property   | repossessed, forecl   |  | ed, seized, or levied?  Value of the property                      |
| heck :        | all that apply and fill in . Go to line 11.  | the details below. |                 | to the second stage of  | repossessed, forecl   | losed, garnished, attacl   | geraan siina seesaa kan asaa ka k |
| heck :        | all that apply and fill in . Go to line 11.  | the details below. |                 | to the second stage of  | repossessed, forecl   | losed, garnished, attacl   | gergan silinga kenakannan ay kanakansa                             |
| neck :<br>No. | all that apply and fill in . Go to line 11. s. Fill in the information   | the details below. |                 | to the second stage of  | repossessed, forecl   | losed, garnished, attacl   | geraan siina seesaa kan asaa ka k |
| neck :<br>No. | all that apply and fill in . Go to line 11.  | the details below. |                 | to the second stage of  | repossessed, forecl   | losed, garnished, attacl   | geraan siina seesaa kan asaa ka k |
| neck :<br>No. | all that apply and fill in . Go to line 11. s. Fill in the information  Creditor's Name                                    | the details below. | De              | scribe the prope  | repossessed, forecl   | losed, garnished, attacl   | geraan siiraa keeska ka k         |
| neck :<br>No. | all that apply and fill in . Go to line 11. s. Fill in the information   | the details below. | De              | scribe the prope  | repossessed, forecl   | losed, garnished, attacl   | geraan siiraa keeska ka k         |
| neck :<br>No. | all that apply and fill in . Go to line 11. s. Fill in the information  Creditor's Name                                    | the details below. | De              | scribe the prope<br>plain what happe  | repossessed, forecl   | losed, garnished, attacl   | geraan siiraa keeska ka k         |
| neck :<br>No. | all that apply and fill in . Go to line 11. s. Fill in the information  Creditor's Name                                    | the details below. | De<br>Ex        | scribe the proper   | repossessed, forecl   | losed, garnished, attacl   | geraan siiraa keeska ka k         |
| neck :<br>No. | all that apply and fill in . Go to line 11. s. Fill in the information  Creditor's Name                                    | the details below. | De<br>Ex        | scribe the proper<br>plain what happe<br>Property was   | repossessed, forecl   | losed, garnished, attacl   | geraan siiraa keeska ka k         |
| neck :<br>No. | all that apply and fill in  Go to line 11.  Fill in the information  Creditor's Name  Number Street                        | the details below. | De Exp          | plain what happe<br>Property was<br>Property was<br>Property was  | repossessed, forecl   | losed, garnished, attacl   | geraan siiraa keeska ka k         |
| neck :<br>No. | all that apply and fill in . Go to line 11. s. Fill in the information  Creditor's Name                                    | the details below. | Ex <sub>1</sub> | plain what happe<br>Property was<br>Property was<br>Property was<br>Property was                                      | repossessed, forecleady  repossessed, foreclosed, garnished, attached, seized, or le  | Date   | Value of the property  \$  |
| neck :<br>No. | all that apply and fill in  Go to line 11.  Fill in the information  Creditor's Name  Number Street                        | the details below. | Ex <sub>1</sub> | plain what happe<br>Property was<br>Property was<br>Property was  | repossessed, forecleady  repossessed, foreclosed, garnished, attached, seized, or le  | losed, garnished, attacl   | Value of the property  \$  |
| neck :<br>No. | all that apply and fill in  Go to line 11.  Fill in the information  Creditor's Name  Number Street                        | the details below. | Ex <sub>1</sub> | plain what happe<br>Property was<br>Property was<br>Property was<br>Property was                                      | repossessed, forecleady  repossessed, foreclosed, garnished, attached, seized, or le  | Date   | Value of the property  \$  |
| neck :<br>No. | all that apply and fill in  Go to line 11.  Fill in the information  Creditor's Name  Number Street                        | the details below. | Ex <sub>1</sub> | plain what happe<br>Property was<br>Property was<br>Property was<br>Property was                                      | repossessed, forecleady  repossessed, foreclosed, garnished, attached, seized, or le  | Date   | gergan silinga kenakannan ay kanakansa                             |
| heck :        | all that apply and fill in . Go to line 11. s. Fill in the information  Creditor's Name  Number Street                     | the details below. | Ex <sub>1</sub> | plain what happe<br>Property was<br>Property was<br>Property was<br>Property was                                      | repossessed, forecleady  repossessed, foreclosed, garnished, attached, seized, or le  | Date   | Value of the property  |
| heck :        | all that apply and fill in  Go to line 11.  Fill in the information  Creditor's Name  Number Street                        | the details below. | Ex <sub>1</sub> | plain what happe<br>Property was<br>Property was<br>Property was<br>Property was                                      | repossessed, forecleady  repossessed, foreclosed, garnished, attached, seized, or le  | Date   | Value of the property  |
| heck :        | all that apply and fill in  Go to line 11.  Fill in the information  Creditor's Name  Number Street  City  Creditor's Name | the details below. | Ex <sub>1</sub> | plain what happe<br>Property was<br>Property was<br>Property was<br>Property was                                      | repossessed, forecleady  repossessed, foreclosed, garnished, attached, seized, or le  | Date   | Value of the property  \$  |
| heck :        | all that apply and fill in . Go to line 11. s. Fill in the information  Creditor's Name  Number Street                     | the details below. | Ex <sub>1</sub> | plain what happe<br>Property was<br>Property was<br>Property was<br>Property was                                      | repossessed, foreclined repossessed. foreclosed. garnished. attached, seized, or le   | Date   | Value of the property  \$  |
| heck :        | all that apply and fill in  Go to line 11.  Fill in the information  Creditor's Name  Number Street  City  Creditor's Name | the details below. | Exp             | plain what happe<br>Property was<br>Property was<br>Property was<br>Property was<br>Property was<br>scribe the proper | repossessed, foreclarity  repossessed. foreclosed. garnished. attached, seized, or le   | Date   | Value of the property  \$  |
| heck :        | all that apply and fill in  Go to line 11.  Fill in the information  Creditor's Name  Number Street  City  Creditor's Name | the details below. | Exp             | plain what happe<br>Property was<br>Property was<br>Property was<br>Property was<br>Scribe the proper                 | repossessed, forecl repossessed. foreclosed. garnished. attached, seized, or le ty  ned repossessed.  | Date   | Value of the property  \$  |
| heck :        | all that apply and fill in  Go to line 11.  Fill in the information  Creditor's Name  Number Street  City  Creditor's Name | the details below. | Exp             | plain what happe<br>Property was<br>Property was<br>Property was<br>Property was<br>Property was<br>scribe the proper | repossessed, forecl repossessed. foreclosed. garnished. attached, seized, or le ty  ned repossessed.  | Date   | Value of the property  \$  |
| heck :        | all that apply and fill in  Go to line 11.  Fill in the information  Creditor's Name  Number Street  City  Creditor's Name | the details below. | De Exp          | plain what happe<br>Property was<br>Property was<br>Property was<br>Property was<br>Scribe the proper                 | repossessed, forecle repossessed, foreclosed, garnished, attached, seized, or le ty  ned repossessed. foreclosed.   | Date   | Value of the property  |

## Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 52 of 60

| tor 1        | David   | Wang  | Case number (if known)   |
|--------------|---|---|--|
|              | First Name Middle Name                              | Last Name   |  |
|              |   |   |  |
| la/ith       | in 00 days hotore you filed for ha                  | enkruptov, did anv creditor, includir   | ng a bank or financial institution, set off any amounts from your  |
| acco         | ounts or refuse to make a paymer                    | nt because you owed a debt?   | ,  |
| ZÍ N         |   | •   |  |
|              | es. Fill in the details.                            |   |  |
|              |   | Roja Novik i transpirata ki kirili  |  |
|              |   | Describe the action the credito   | or took Date action Amount was taken   |
| ā            | creditor's Name                                     | - Inchile Are the Area in her in the Area in  |  |
|              |   |   | To ordinate the second  |
| 7            | lumber Street                                       |   | Y  |
|              |   |   |  |
| _            |   |   | time a transmission to transfer of the first |
| õ            | Sity State ZIP Co                                   | ode last 4 digits of account numb   | ber: XXXX  |
| _            |   | Lace 4 digito of account fiding   |  |
| With         | in 1 year before you filed for ban                  | knintey, was any of your property i   | in the possession of an assignee for the benefit of  |
| cred         | itors, a court-appointed receiver,                  | a custodian, or another official?   |  |
| <b>2</b> 1 N | 40  |   |  |
| _ Y          |   |   |  |
|              | _   |   |  |
| rt 5:        | List Certain Gifts and Con                          | tributions  |  |
|              |   |   |  |
|              | in a consultation was filed for bor                 | abountou did you give any gifte with  | h a total value of more than \$600 per person?   |
|              |   | iktupicy, aid you give any gins with  | is a total value of more than 4000 per person.   |
| <b>Z</b>     |   |   |  |
| LJ Y         | es. Fill in the details for each gift.              |   |  |
|              | 21 821  | AND THE RESERVE OF THE SECOND | Dates you gave Value   |
|              | Gifts with a total value of more than \$ per person | 600 Describe the gifts  | the gifts  |
|              |   |   | And the state of t |
|              |   | :<br>:  | \$   |
| P            | erson to Whom You Gave the Gift                     |   | T  |
|              |   |   | \$   |
| ****         |   |   |  |
| -            | Lumbers Street                                      |   |  |
| 37           | lumber Street                                       |   |  |
| 7            | ity State ZIP Co                                    | ode   |  |
| ·            | -in-  |   |  |
| P            | erson's relationship to you                         |   |  |
|              | and participated as a second control of the         |   |  |
|              | Gifts with a total value of more than \$6 person    | 00 Describe the gifts   | Dates you gave Value the gifts   |
| h            | er peravo   |   |  |
|              |   |   | ·  |
| P            | erson to Whom You Gave the Gift                     |   |  |
|              |   |   | \$   |
| -            |   |   | <u> </u>   |
|              |   |   |  |
| N            | lumber Street                                       |   |  |
|              |   |   | AND THE PROPERTY OF THE PROPER |
| ō            | ity State ZIP Co                                    | ode   |  |
|              |   |   |  |
| P            | erson's relationship to you                         |   |  |

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 53 of 60

| ebtor 1                                      | David First Name Middie Name  | Wang Last Name   | Case number (if known)  |
|--|---|--|---|
|  | : Estimante iniciae realiza   | Cuci Nano  |   |
| Witt   | nin 2 vears hefore you filed fo   | or bankruptcy, did you give any gifts or   | contributions with a total value of more than \$600 to any charity?                           |
| Ø  |   | , and a green and green and green  | •   |
|  | Yes. Fill in the details for each   | gift or contribution.  |   |
|  | Otto a partitudian to should  | Describe what you contributed  | Date you Value  |
|  | Gifts or contributions to charitie that total more than \$600   | is a pescribe what you constituted   | contributed   |
|  | 4444  |  |   |
|  |   |  | <u> </u>  |
|  | Charity's Name  |  |   |
|  |   |  | <u> </u>  |
|  |   |  |   |
|  | Number Street   |  |   |
|  |   |  |   |
|  | City State ZIP Code   |  |   |
|  |   |  |   |
| rt 6   | List Certain Losses   |  |   |
|  |   |  |   |
| \$-, A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | Describe the property you lost a how the loss occurred  | 化二甲基二甲基二甲基二甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲   | age for the loss Date of your Value of property loss lost ce has paid. List pending insurance |
|  |   | FOR THE STATE OF T |   |
| ***  | en en en significações de describitações describitações de cristia de la cristia de como com com com com com com com com co | 00   |   |
| ırt 7  | List Certain Payments   | or Transfers   |   |
| . Witi                                       | nin 1 year before you filed for   | bankruptcy, did you or anyone else ac  | ting on your behalf pay or transfer any property to anyone                                    |
| VOII   | consulted about seeking bar   | nkruptcy or preparing a bankruptcy pet   | ition?<br>encies for services required in your bankruptcy.                                    |
|  | •   | Jetition preparers, or credit counsoling ago   | chico is solvidos roquires ir year sama apragr  |
| ZÍ   | No<br>Yes. Fill in the details.   |  |   |
|  | res. Fill til tile detans.  | Description and value of any p   | property transferred Date payment or Amount of payment  |
|  |   | Description and value of any p   | transfer was<br>made  |
|  | Person Who Was Paid   | A SAME Extended and Constitution   | <u> </u>  |
|  | Number Street   |  | s   |
|  |   |  |   |
|  |   |  | \$  |
|  | City State 2  | ZIP Code   |   |
|  | Oily State 2  |  |   |
|  | Email or website address  |  |   |
|  | Person Who Made the Payment, if Not   | You  |   |
|  |   | Production to the production of the contract o |   |

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 54 of 60

|  | First Name Middle Name Last N  | Wang Name   | Case number (if known)   |  |                        |
|--|--|---|--|--|------------------------|
|  |  |   |  |  |                        |
| be, i munifica a                           |  | Description and value of any property   | transferred  | Date payment or transfer was made  | Amount of payment      |
| Pe   | erson Who Was Paid   |   |  |  | ¢.                     |
| N  | umber Street   |   |  | -  | Φ                      |
|  |  |   |  |  | \$                     |
| Ci   | ity State ZIP Code   |   |  |  |                        |
| Ēŕ   | mail or website address  |   |  |  |                        |
| Pe   | erson Who Made the Payment, if Not You   |   |  |  |                        |
| No<br>Ye:                                  | s. Fill in the details.  | Description and value of any property   | transferred  | Date payment or  | Amount of paym         |
|  |  | Description and value or any property   |  | transfer was<br>made   |                        |
| P  | erson Who Was Paid   |   |  |  |                        |
|  |  |   |  |  | <b>c</b>               |
| Ñ  | umber Street   | :   |  | Action to the second se | \$                     |
| N  | iumber Street  |   |  |  | \$<br>\$               |
| -<br>či<br>thin                            | State ZIP Code   | tcy, did you sell, trade, or otherwise  | transfer any property t  | o anyone, other than   | \$<br>\$<br>n property |
| thin<br>nsfe<br>lude<br>not<br>No          | State ZIP Code  a 2 years before you filed for bankrup erred in the ordinary course of your be both outright transfers and transfers management  | ousiness or financial affairs?<br>nade as security (such as the granting  | of a security interest or m  | ortgage on your prop   | perty).                |
| Tithin<br>nsfe<br>lude<br>not<br>No<br>Yes | State ZIP Code  1 2 years before you filed for bankrup erred in the ordinary course of your be both outright transfers and transfers management tinclude gifts and transfers that you have   | pusiness or financial affairs? nade as security (such as the granting or already listed on this statement.  Description and value of property             | of a security interest or m  | ortgage on your prop   | perty).  Date transfer |
| cithinnsfelude<br>not<br>No<br>Yes         | State ZIP Code  1 2 years before you filed for bankrup erred in the ordinary course of your be the both outright transfers and transfers mand transfers to the course of your be to both outright transfers and transfers that you have the course of the cour | pusiness or financial affairs? nade as security (such as the granting or already listed on this statement.  Description and value of property             | of a security interest or m  | ortgage on your prop   | perty).  Date transfer |
| thinnsfellude not Yes                      | State ZIP Code  1 2 years before you filed for bankrup erred in the ordinary course of your be the both outright transfers and transfers m thinclude gifts and transfers that you have s. Fill in the details.  erson Who Received Transfer  | pusiness or financial affairs? nade as security (such as the granting re already listed on this statement.  Description and value of property transferred | of a security interest or m  Describe any property or debts paid in exchar | ortgage on your prop   | perty).  Date transfer |
| Thin nsfelude not No Yes                   | State ZIP Code  a 2 years before you filed for bankrup erred in the ordinary course of your be both outright transfers and transfers m t include gifts and transfers that you hav  s. Fill in the details.  erson Who Received Transfer  umber Street  ty State ZIP Code erson's relationship to you   | pusiness or financial affairs? nade as security (such as the granting or already listed on this statement.  Description and value of property             | of a security interest or m  Describe any property or debts paid in exchar | ortgage on your prop   | perty).  Date transfer |
| Per Circ                                   | State ZIP Code  a 2 years before you filed for bankrup erred in the ordinary course of your be both outright transfers and transfers m t include gifts and transfers that you hav  s. Fill in the details.  erson Who Received Transfer  umber Street  | pusiness or financial affairs? nade as security (such as the granting re already listed on this statement.  Description and value of property transferred | of a security interest or m  Describe any property or debts paid in exchar | ortgage on your prop   | perty).  Date transfer |
| Per    | State ZIP Code  a 2 years before you filed for bankrup erred in the ordinary course of your be both outright transfers and transfers management t include gifts and transfers that you have s. Fill in the details.  erson Who Received Transfer  umber Street  ty State ZIP Code erson's relationship to you  | pusiness or financial affairs? nade as security (such as the granting re already listed on this statement.  Description and value of property transferred | of a security interest or m  Describe any property or debts paid in exchar | ortgage on your prop   | perty).  Date transfer |
| Per Ru                                     | State ZIP Code  a 2 years before you filed for bankrup erred in the ordinary course of your be be both outright transfers and transfers m t include gifts and transfers that you hav s. Fill in the details.  erson Who Received Transfer  ty State ZIP Code erson's relationship to you erson Who Received Transfer   | pusiness or financial affairs? nade as security (such as the granting re already listed on this statement.  Description and value of property transferred | of a security interest or m  Describe any property or debts paid in exchar | ortgage on your prop   | perty).  Date transfer |

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 55 of 60

| Debtor 1                               | David First Name Middle Name  | Wang   | Case number (if known)   |  |
|--|---|--|--|--|
|  |   |  |  |  |
|  |   | r bankruptcy, did you transfer any prope   | rty to a self-settled trust or similar devic   | e of which you                                 |
|  | a beneficiary? (These are often   | called asset-protection devices.)  |  |  |
| <b>2</b>                               | No<br>Yes. Fill in the details.   |  |  |  |
|  | res. I m in the details.  | eer need algebra vitra variable Basel and Algebra (  |  |  |
|  |   | Description and value of the prop  | erty transferred   | Date transfer<br>was made                      |
|  |   | The second secon |  |  |
|  | Name of trust   |  |  | ***************************************        |
|  |   |  |  |  |
| ,                                      |   |  |  | noteskunduski, svoda vačundsti                 |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |   |  |  |  |
| Part 8                                 | <del></del>   | counts, instruments, Safe Deposit  |  |  |
|  |   | ankruptcy, were any financial accounts   | or instruments held in your name, or for   | your benefit,                                  |
|  | sed, sold, moved, or transferred<br>lude checking, savings, money :                                     | l?<br>market, or other financial accounts; cert  | ificates of deposit; shares in banks. cre  | dit unions.                                    |
|  |   | cooperatives, associations, and other fi   |  |  |
| Ø                                      | No  |  |  |  |
|  | Yes. Fill in the details.   | the first the state of the english distributions   |  |  |
|  |   | Last 4 digits of account number  | Type of account or Date account wa instrument closed, sold, mo or transferred  |  |
|  | Name of Financial Institution   |  | ☐ Checking   | \$   |
|  |   |  | ☐ Savings  | Ψ  |
|  | Number Street   |  | Money market   |  |
|  |   |  | ☐ Brokerage  |  |
|  | City State ZIP  | Code   | ☐ Other  |  |
| •                                      | in again ng training tha an air an air an air an tha air an air an air an air an tao the Airmean an air |  |  |  |
|  | Daniel Pharmack I adda. Man   | xxxx   | Checking   | \$   |
|  | Name of Financial Institution   |  | ☐ Savings  |  |
|  | Number Street   |  | Money market   |  |
|  |   |  | Brokerage  |  |
|  | City State ZIP  | Code   | ☐ Other  |  |
|  |   |  |  |  |
| 21. Do y                               | you now have, or did you have v   | within 1 year before you filed for bankruj   | ptcy, any safe deposit box or other depo   | sitory for                                     |
| seci                                   | urities, cash, or other valuables<br>No   | • •  |  |  |
|  | Yes. Fill in the details.   |  | gaga ta gita da a sa kacamatan kan da ka<br>Kan da kan d | ensprise nige school of the tribe problem from |
|  |   | Who else had access to it?   | Describe the contents  | Do you still have it?                          |
|  |   |  |  | □ No   |
|  |   |  |  | ☐ Yes  |
|  | Name of Financial Institution   | Name   |  |  |
|  | Number Street   | Number Street  | y y may dend a PA (PA (PA (PA)))   |  |
|  |   | <del>~~~</del>   |  |  |
|  |   | City State ZIP Code  |  |  |
|  | City State ZIP  | Code   |  |  |

## Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 56 of 60

| Debtor 1    | David First Name Middle Name Las  | Wang   | Case number (if known)   |
|-------------|---|--|--|
|             | , sorraine model team Eas   | , realite  |  |
| 22. Have :  | •   | or place other than your home within   | n 1 year before you filed for bankruptcy?  |
|             | es. Fill in the details.  |  |  |
|             |   | Who else has or had access to it?  | Describe the contents Do you still have it?  |
|             |   |  | □No  |
|             | Name of Storage Facility  | Name   | ☐ Yes  |
|             | Number Street   | Number Street  |  |
|             |   | City State ZIP Code  |  |
|             | City State ZIP Code   | and the second survey of the second section and the second section of the second |  |
| Part 9:     | identify Property You Hold  | or Control for Someone Else  |  |
| 23. Do y    |   |  | perty you borrowed from, are storing for,  |
| or ho       | old in trust for someone.   | ••   |  |
| Ø №<br>У [] | lo<br>'es. Fill in the details.   |  |  |
| -           |   | Where is the property?   | Describe the property Value  |
|             |   |  |  |
| ;           | Owner's Name  |  | \$   |
| ;           | Number Street   | Number Street  |  |
|             |   |  |  |
|             | City State ZIP Code   | City State ZIP Co  | de   |
|             | _   | 4 - 1 1 # 47   |  |
| Part 10     | Give Details About Environment  | nental information   |  |
|             | purpose of Part 10, the following defin   |  |  |
| hazar       |   | r material into the air, land, soil, surfa                                       | erning pollution, contamination, releases of<br>ace water, groundwater, or other medium,<br>wastes, or material. |
| ■ Site n    | means any location, facility, or proper<br>e it or used to own, operate, or utilize | ty as defined under any environment  | al law, whether you now own, operate, or   |
|             |   |  | ous waste, hazardous substance, toxic  |
|             | tance, hazardous material, pollutant,   |  | Austo, Hazardolo Gabelanos, toxio  |
| Report a    | II notices, releases, and proceedings   | that you know about, regardless of v   | when they occurred.  |
| 24. Has a   | ny governmental unit notified you tha   | at you may be liable or potentially liab   | ole under or in violation of an environmental law?   |
| Ø N         | •   |  |  |
| ******      | es. Fill in the details.  |  |  |
|             |   | Governmental unit E  | nvironmental law, if you know it Date of notice  |
|             |   |  |  |
| Na          | ame of site   | Governmental unit  |  |
| _           |   | N  |  |
| Nu          | umber Street  | Number Street  |  |
| _           | A   | City State ZIP Code  |  |
|             |   |  |  |

# Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 57 of 60

| tor 1 | David                                   |  | Wang  | Case number (if known)   |  |
|-------|---|--|---|--|--|
|       | First Name                              | Middle Name Las  | st Name   |  |  |
|       |   |  |   |  |  |
| Hav   | e you notified a                        | any governmental unit  | of any release of hazardous materia   | 1?   |  |
| Ø     |   |  |   |  |  |
|       | No<br>Yes. Fill in the                  | dotaile  |   |  |  |
| ***** | tes. i iii iii tiie                     | uctans.  | Governmental unit   | Environmental law, if you know it  | Date of notice   |
|       |   |  |   |  |  |
|       |   |  |   |  | re i cheminali   |
|       | Name of site                            |  | Governmental unit   |  |  |
|       | Number Street                           | <u></u>  |   |  |  |
|       | Number Street                           |  | Number Street   |  |  |
|       | *************************************** |  | 42.7  |  |  |
|       |   |  | City State ZIP Code   |  |  |
|       | City                                    | State ZIP Code   | -   |  |  |
|       |   | er en apareiro de adamento en el entre en el entre el en |   | The second secon       | mana and and are in the service and extraordistration  |
| Hav   | e you been a pa                         | arty in any judicial or a  | dministrative proceeding under any  | environmental law? Include settlements and   | orders.  |
| Ø     | No                                      |  |   |  |  |
|       | Yes. Fill in the                        | details.   |   |  |  |
|       |   |  | Court or agency   | Nature of the case   | Status of the case   |
|       |   |  |   | <ul> <li>A Principal of the Control of the Cont</li></ul> | Cuat   |
|       | Case title                              |  |   | ···  | Pending  |
|       |   |  | Court Name  |  | On appea   |
|       |   |  |   | <del></del> :  | Conclude   |
|       |   |  | Number Street   |  | Concidde   |
|       | Case number                             |  |   |  | 1  |
|       | Case number                             |  | City State ZIP Code   |  |  |
|       |   |  |   |  |  |
|       | A sole prop                             | rietor or self-employed<br>of a limited liability com  | in a trade, profession, or other acti<br>npany (LLC) or limited liability partn |  |  |
|       | •                                       | -  | xecutive of a corporation   |  |  |
|       |   |  |   | lian   |  |
| ì     | Lan owner o                             | t at least 5% of the voti  | ng or equity securities of a corpora  | tion .   |  |
| V i   | No. None of the                         | above applies. Go to I   | Part 12.  |  |  |
|       | Yes. Check all t                        | that apply above and fil   | II in the details below for each busir  |  | Historia de la compansión |
|       |   |  | Describe the nature of the business   | "我们就是我们的,我们就是我们的,我们就是没有,我们就是我们的,我们就是我们的我们的,我们就是我们的,我们就是这个意思。"  | 电压 电相对阻止线 膝 医硫化甲基二氏病   |
|       | Business Name                           |  | <ul> <li>A SAN THE STORY SEED AND SEA AND SEA AND SERVICE.</li> </ul>           | Do not include Social Security a   | autilize Of HIM.   |
|       |   |  | :   | EIN:   |  |
|       | Number Street                           |  | -   | Dates business existed   |  |
|       |   |  | Name of accountant or bookkeeper  | Dates business existed   | na y sylvelyte and for   |
|       |   |  | <b></b> :   | From To  |  |
|       |   |  |   | From To  | ****   |
|       | City                                    | State ZIP Code   |   |  | NEW ARREST   |
|       |   |  | Describe the nature of the business   | Employer identification number Do not include Social Security i  | 医松脂蛋白蛋白 经外面包付款的 化氯甲烷烷  |
|       | Business Name                           |  |   |  |  |
|       |   |  | * = = *******   | EIN:   |  |
|       | Number Street                           |  | - Landaga and a constant or books and   |  |  |
|       |   |  | Name of accountant or bookkeeper  |  | Transfer in profit   |
|       |   |  | -   |  |  |
|       |   |  | _   | From To  |  |
|       | City                                    | State ZIP Code   | 1   |  |  |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 58 of 60

| Debtor 1   | David  |  | Case number (if known)  |
|--|--|--|---|
|  | First Name Middle Name   | Last Name  |   |
| and the second s | and the second s | Describe the nature of the business  | Employer Identification number  Do not include Social Security number or (TIN.                    |
| Shakis life conditions and a second s | Business Name  |  | EIN: -  |
| o estivat estilat un managarante.  | Number Street  | Name of accountant or bookkeeper   | Dates business existed  |
| Administration comments and a second comments are second comments and a second comments and a second comments are second comments and a second comments and a second comments are second comments and a second comment and a second comments are second comments and a second comment and a second c | City State ZIP Cod   | de   | From To   |
| noon sprance par Colonger  | ,  |  | a a form of a terminate to funding at   |
| inst<br><b>⊠</b> i   | itutions, creditors, or other parties  |  | anyone about your business? Include all financial   |
|  | Name   | MM / DD / YYYY   |   |
|  | Number Street  |  |   |
| Part 1   | City State ZIP Cod   | ie –   |   |
| l ha<br>ans<br>in c  | ave read the answers on this State   | stand that making a false statement, conceali<br>e can result in fines up to \$250,000, or impriso | <i>D</i>  |
| ×  | Signature of Debtor 1  | Signature of Debtor 2  | housward  |
|  | Date <u>4-13-201</u> )   | Date 4-13-6  |   |
| Did<br>☑<br>□  | No Yes   | our Statement of Financial Affairs for Individue   | als Filing for Bankruptcy (Uπicial Form 107)?   |
|  |  | who is not an attorney to help you fill out bar  | nkruptcy forms?   |
| <b>☑</b>   | No<br>Yes. Name of person  |  | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|  |  |  | Deciaration, and Signature (Official Form 119).   |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 59 of 60

| Debtor 1                       | David               |                              | Wang      |  |
|--------------------------------|---------------------|------------------------------|-----------|--|
|                                | First Name          | Middle Name                  | Last Name |  |
| Debtor 2                       | Allie               | Shiver Wang                  |           |  |
| (Spouse, if filing)            | First Name          | Middle Name                  | Last Name |  |
| United States (<br>Case number | Bankruptcy Court fo | rthe: Northern District of I | llinois   |  |

☐ Check if this is an amended filing

12/15

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

| Creditor's name: OneMain   | For any creditors that you listed in Part 1 of Schedule D: Credinformation below. |  |   |
|--|---|--|---|
| Description of Automobile securing debt:  Creditor's name:  PNC Bank  Description of Automobile property  Retain the property and enter into a Retain the property and enter into a Retain the property and [explain]:  Creditor's name:  PNC Bank  Description of Automobile securing debt:  Creditor's name:  Bank of America  Description of Automobile securing debt:  Creditor's name:  Creditor's name:  Bank of America  Description of Automobile securing debt:  Creditor's name:  Creditor's name:  Bank of America  Description of Automobile securing debt:  Creditor's name:  Description of Automobile securing debt:  Creditor's name:  Creditor's  | Identify the creditor and the property that is collateral                         | What do you intend to do with the property that  | Did you claim the property as exempt on Schedule C? |
| Creditor's name:  PNC Bank  Description of property Securing debt:  Creditor's name:  PNC Bank  Retain the property.  Retain the property and redeem it.  Retain the property and enter into a Reafirmation Agreement.  Retain the property and [explain]:  Creditor's name:  Bank of America  Pascription of property Securing debt:  Retain the property.  Retain the property and redeem it.  Retain the property and redeem it.  Retain the property and enter into a Reafirmation Agreement.  Retain the property and redeem it.  Pascription of Retain the property and redeem it.  Retain the property and enter into a Reafirmation Agreement.   | name: OneMain  Description of Automobile property                                 | Retain the property and redeem it.  Retain the property and enter into a   |   |
| Creditor's name:  PNC Bank  Description of property Securing debt:  Creditor's name:  Bank of America  Description of property Securing debt:  Creditor's name:  Creditor's name:  Description of property Securing debt:  Creditor's name:  Creditor's name |   | The state of the s |   |
| Retain the property and enter into a Reaffirmation Agreement.    Retain the property and [explain]:  | DNO Donk  | ☐ Surrender the property.  |   |
| Creditor's name: Bank of America  Description of property securing debt:  Creditor's name: Bank of America  Description of property securing debt:  Creditor's name: Surrender the property and redeem it.  Description of property securing debt: Surrender the property and enter into a securing debt: No name: Surrender the property.  Creditor's name: Surrender the property.  Description of property securing debt: Retain the property and redeem it.  Description of property securing debt: Retain the property and enter into a securing debt: Retain the property and enter into a securing debt:  | property  | $\mathbf{Z}$ Retain the property and enter into a  | <b>☑</b> Yes  |
| Description of property securing debt:  Retain the property and enter into a Retain the property and [explain]:  Creditor's name:  Description of property Surrender the property and redeem it.  Retain the property and [explain]:  Creditor's name:  Description of property Surrender the property Retain the property and redeem it.  Retain the property and redeem it.  Retain the property and redeem it.  Retain the property and enter into a Retain the property and enter into a Reaffirmation Agreement.  |   | Retain the property and [explain]:   | :   |
| Description of property securing debt:  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:  Creditor's name:  Description of property Retain the property.  Retain the property.  Retain the property and redeem it.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.   | Dank of America   |  |   |
| Creditor's name:  Description of property securing debt:  Retain the property and [explain]:  Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.   | property  | Retain the property and enter into a   | <b>☑</b> Yes  |
| name:  Description of property  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  | ·   | Retain the property and [explain]:   |   |
| Description of property Retain the property and enter into a securing debt:  Reaffirmation Agreement.  |   | · · · ·  | No  |
| ······································   | property  | Retain the property and enter into a   | ☐ Yes   |
|  | securing debt.  |  |   |

Case 17-12259 Doc 1 Filed 04/19/17 Entered 04/19/17 11:28:19 Desc Main Document Page 60 of 60

|          |            |             |           | o o |                       |
|----------|------------|-------------|-----------|-----|-----------------------|
| Debtor 1 | David      |             | Wang      |     | Case number (# known) |
|          | First Name | Middle Name | Last Name |     |                       |

| Describe your linexpired personal property leases | Will the lease be assumed? |  |  |  |
|---|----------------------------|--|--|--|
|   |                            |  |  |  |
| Description of leased property:                   | ☐ No<br>☐ Yes              |  |  |  |
| essor's name:                                     | ☐ No                       |  |  |  |
| Description of leased roperty:                    | ☐ Yes                      |  |  |  |
| essor's name:                                     | □ No                       |  |  |  |
| Description of leased roperty:                    | ☐ Yes                      |  |  |  |
| essor's name:                                     |                            |  |  |  |
| escription of leased roperty:                     | Yes                        |  |  |  |
| essor's name:                                     | □ No                       |  |  |  |
| escription of leased<br>roperty:                  | Yes                        |  |  |  |
| essor's name:                                     | □ No                       |  |  |  |
| escription of leased<br>roperty:                  | Yes                        |  |  |  |
| essor's name:                                     |                            |  |  |  |
| escription of leased roperty:                     | Yes                        |  |  |  |
|   |                            |  |  |  |